Adopted Rejected

COMMITTEE REPORT

YES: 15 NO: 10

MR. SPEAKER:

Your Committee on <u>Ways and Means</u>, to which was referred <u>House Bill 1001</u>, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill **be amended** as follows:

- 1 Page 26, between lines 39 and 40, begin a new paragraph and insert:
- 2 "YOUTH FIRST, INC.
- 3 Total Operating Expense 250,000
- 4 The budget agency shall transfer \$250,000 to the Youth First, Inc.
- 5 from the state general fund before August 1, 2009, for the purpose
- 6 of funding school social workers.
- 7 Release of funds must be approved by the budget agency after
- 8 budget committee review before money may be allotted from the
- 9 above appropriation to Youth First organization, Inc.".
- Page 49, line 2, delete "2,406,684" and insert "3,406,684".
- Page 49, between lines 2 and 3, begin a new line blocked left and
- 12 insert:
- 13 "Of the above appropriation, the office of tourism shall distribute
- \$1,000,000 to the Indiana Sports Corporation to promote the
- 15 hosting of amateur sporting events in Indiana cities. Funds may be
- released after review by the budget committee. The above

1 appropriation includes \$500,000 for grants for local convention 2 and visitors bureaus and other local organizations that exist to 3 promote tourism. The office of tourism shall develop standards for applications for grants and awarding grants, including a local 4 5 match requirement. The maximum amount of a grant is \$50,000. Funds may be released only after review by the budget committee.". 8 Page 82, after line 49, begin a new line blocked left and insert: 9 "Notwithstanding any other provision of this SECTION, the 10 amounts appropriated to the state universities and state university 11 programs from the state general fund may not be construed as the 12 base amount of funding for the universities or programs. The total 13 amount appropriated from the state general fund and the ARRA 14 State Fiscal Stabilization Act is considered the base amount of 15 funding for each university or program.". 16 Page 88, line 24, delete "\$250,000" and insert "\$460,000". Page 95, between lines 20 and 21, begin a new line blocked left and 17 18 insert: 19 "The foregoing appropriation for alternative schools may be used 20 for the purposes of the dropout prevention program fund 21 (IC 20-20-37).". 22 Page 96, line 10, delete "BACKBONE". 23 Page 96, between lines 12 and 13, begin a new line double block 24 indented and insert: 25 "INTERNET BACKBONE". 26 Page 96, between lines 13 and 14, begin a new line double block 27 indented and insert: "I-SPAN PILOT PROJECT 28 29 From ARRA Funding For Broadband Programs or 30 **Development Total Operating Expenses** 4,000,000 31 32 The budget agency shall apply for the appropriate distance 33 learning, telemedicine, and broadband or national 34 telecommunications and information administration broadband 35 technology opportunities program grants to provide funding for 36 the above appropriation. If grants are not available in amounts 37 sufficient to provide funding for the above appropriation, any

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other funding under ARRA not otherwise appropriated by this act

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1	may be used to fund the above appropriation. Notwithstanding
2	IC 4-13-2-19 and any other law, the above appropriation for the
3	I-SPAN Pilot Project does not revert to the general fund or another
4	fund at the close of a state fiscal year but remains available in
5	subsequent state fiscal years for the purposes of the
6	appropriation.".
7	Page 117, between lines 40 and 41, begin a new paragraph and
8	insert:
9	"SECTION 49. IC 2-5-31 IS ADDED TO THE INDIANA CODE
10	AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
11	UPON PASSAGE]:
12	Chapter 31. Indiana Soldiers' and Sailors' Children's Home
13	Task Force
14	Sec. 1. As used in this chapter, "children's home" refers to the
15	Indiana Soldiers' and Sailors' Children's Home established by
16	IC 20-22.5-2-5 (IC 16-33-4-5 before July 1, 2009).
17	Sec. 2. As used in this chapter, "task force" refers to the Indiana
18	Soldiers' and Sailors' Children's Home task force established by
19	section 3 of this chapter.
20	Sec. 3. (a) The Indiana Soldiers' and Sailors' Children's Home
21	task force is established.
22	(b) The task force consists of eight (8) voting members and five
23	(5) nonvoting members.
24	(c) The voting members consist of the following:
25	(1) Two (2) members of the house of representatives
26	appointed by the speaker of the house of representatives.
27	(2) Two (2) members of the house of representatives
28	appointed by the minority leader of the house of
29	representatives.
30	(3) Two (2) members of the senate appointed by the president
31	pro tempore of the senate.
32	(4) Two (2) members of the senate appointed by the minority
33	leader of the senate.
34	(d) The five (5) nonvoting members serve in an advisory
35	capacity. The nonvoting members consist of the following:
36	(1) The state superintendent of public instruction or the state
37	superintendent's designee.
38	(2) The director of the department of child services

1	established by IC 31-25-1-1 or the director's designee.
2	(3) The department adjutant of the American Legion
3	Department of Indiana or the department adjutant's designee.
4	(4) A representative of the Alumni Association of the Indiana
5	Soldiers' and Sailors' Children's Home, selected by the
6	Alumni Association of the Indiana Soldiers' and Sailors'
7	Children's Home.
8	(5) The Marion County juvenile court judge.
9	(e) If a legislative member of the task force ceases being a
10	member of the chamber from which the member was appointed,
11	the member ceases to be a member of the task force.
12	(f) A legislative member of the task force may be removed at
13	any time by the appointing authority who appointed the legislative
14	member.
15	(g) If a vacancy exists on the task force, the appointing authority
16	who appointed the former member whose position has become
17	vacant shall appoint an individual to fill the vacancy.
18	Sec. 4. The following voting members shall serve as co-chairs of
19	the task force:
20	(1) One (1) member described in section 3(c)(1) of this chapter
21	appointed by the speaker of the house of representatives.
22	(2) One (1) member described in section 3(c)(2) of this chapter
23	appointed by the president pro tempore of the senate.
24	Sec. 5. Five (5) voting task force members constitute a quorum.
25	The affirmative votes of at least five (5) voting members of the task
26	force are necessary for the task force to make recommendations or
27	adopt a final report.
28	Sec. 6. (a) Each member of the task force who is not a state
29	employee is entitled to the minimum salary per diem provided by
30	IC 4-10-11-2.1(b). The member is also entitled to reimbursement
31	for traveling expenses as provided under IC 4-13-1-4 and other
32	expenses actually incurred in connection with the member's duties
33	as provided in the state policies and procedures established by the
34	Indiana department of administration and approved by the budget
35	agency.

reimbursement for traveling expenses as provided under

(b) Each member of the task force who is a state employee but is not a member of the general assembly is entitled to

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- IC 4-13-1-4 and other expenses actually incurred in connection with the member's duties as provided in the state travel policies and procedures established by the Indiana department of administration and approved by the budget agency.
- (c) Each member of the task force who is a member of the general assembly is entitled to receive the same per diem, mileage, and travel allowances paid to members of the general assembly serving on interim study committees established by the legislative council.

Sec. 7. (a) The task force shall do the following:

- (1) Evaluate estimated future capital and operating costs needed to continue to operate the children's home as it was operated on July 1, 2008.
- (2) Review the current fee structure for parents or guardians of children residing at the children's home.
- (3) Evaluate potential management efficiencies that may be made at the children's home.
- (4) Evaluate the feasibility of obtaining federal or private funds to continue to operate the children's home as it was operated on July 1, 2008, or under an alternative management and ownership structure.
- (5) Evaluate possible alternative uses for the buildings, grounds, equipment, and other assets of the children's home, including possible use as a charter school, a vocational school, a higher education facility, an alternate facility for a state agency or a unit of local government, or any other alternative that the task force considers to be appropriate.
- (6) Evaluate the potential to operate the children's home in its current capacity or in some other capacity under a public-private agreement.
- (7) Evaluate alternatives for education and other services for the children at the children's home.
 - (8) Evaluate whether the home should cease operation after June 30, 2016, or whether it should operate in a different capacity.
- (9) Make specific recommendations regarding the placement of children if the children's home is closed.
- 38 (b) The task force shall hear testimony and receive information

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regarding children discharged from the children's home as a result of the children's home closure in May 2009. The task force may consult with the American Legion Department of Indiana to receive information voluntarily provided to the American Legion Department of Indiana by the parent or guardian of a child discharged from the children's home as a result of the children's home's closure in May 2009. The department of child services shall before July 1 of each year provide the task force with information on a child discharged from the children's home as a result of the children's home's closure in May 2009 who is in the custody of the department of child services, regarding whether the child:

(1) is currently enrolled in school; or

(2) has been arrested or incarcerated.

The department of child services is not required to provide the task force information pertaining to the child to the extent the information violates any federal or state confidentiality provisions.

- Sec. 8. The task force shall annually report the results of its study in an electronic format under IC 5-14-6 to the general assembly before November 1.
- Sec. 9. (a) The legislative services agency shall provide staff support for the task force.
- (b) The task force may employ consultants to assist it with its study with the approval of the legislative council.
 - Sec. 10. This chapter expires July 1, 2016.".
- Page 119, between lines 22 and 23, begin a new paragraph and insert:

"SECTION 55. IC 4-10-18-10 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 10. (a) The state board of finance may lend money from the fund to entities listed in subsections (e) through (j) (k) for the purposes specified in those subsections.

(b) An entity must apply for the loan before May 1, 1989, in a form approved by the state board of finance. As part of the application, the entity shall submit a plan for its use of the loan proceeds and for the repayment of the loan. Within sixty (60) days after receipt of each application, the board shall meet to consider the application and to review its accuracy and completeness and to determine the need for the loan. The board shall authorize a loan to an entity that makes an

application if the board approves its accuracy and completeness and determines that there is a need for the loan and an adequate method of repayment.

- (c) The state board of finance shall determine the terms of each loan, which must include the following:
 - (1) The duration of the loan, which must not exceed twelve (12) years.
 - (2) The repayment schedule of the loan, which must provide that no payments are due during the first two (2) years of the loan.
 - (3) A variable rate of interest to be determined by the board and adjusted annually. The interest rate must be the greater of:
 - (A) five percent (5%); or

- (B) two-thirds (2/3) of the interest rate for fifty-two (52) week United States Treasury bills on the anniversary date of the loan, but not to exceed ten percent (10%).
- (4) The amount of the loan or loans, which may not exceed the maximum amounts established for the entity by this section.
- (5) Any other conditions specified by the board.
- (d) An entity may borrow money under this section by adoption of an ordinance or a resolution and, as set forth in IC 5-1-14, may use any source of revenue to repay a loan under this section. This section constitutes complete authority for the entity to borrow from the fund. If an entity described in subsection (i) fails to make any repayments of a loan, the amount payable shall be withheld by the auditor of state from any other money payable to the consolidated city. If any other entity described in this section fails to make any repayments of a loan, the amount payable shall be withheld by the auditor of state from any other money payable to the entity. The amount withheld shall be transferred to the fund to the credit of the entity.
- (e) A loan under this section may be made to a city located in a county having a population of more than twenty-four thousand (24,000) but less than twenty-five thousand (25,000) for the city's waterworks facility. The amount of the loan may not exceed one million six hundred thousand dollars (\$1,600,000).
- (f) A loan under this section may be made to a city the territory of which is included in part within the Lake Michigan corridor (as defined in IC 14-13-3-2) for a marina development project. As a part of its application under subsection (b), the city must include the following:

(1) Written approval by the Lake Michigan marina development commission of the project to be funded by the loan proceeds.

2.2.

(2) A written determination by the commission of the amount needed by the city, for the project and of the amount of the maximum loan amount under this subsection that should be lent to the city.

The maximum amount of loans available for all cities that are eligible for a loan under this subsection is eight million six hundred thousand dollars (\$8,600,000).

- (g) A loan under this section may be made to a county having a population of more than one hundred seventy thousand (170,000) but less than one hundred eighty thousand (180,000) for use by the airport authority in the county for the construction of runways. The amount of the loan may not exceed seven million dollars (\$7,000,000). The county may lend the proceeds of its loan to an airport authority for the public purpose of fostering economic growth in the county.
- (h) A loan under this section may be made to a city having a population of more than fifty-nine thousand (59,000) but less than fifty-nine thousand seven hundred (59,700) for the construction of parking facilities. The amount of the loan may not exceed three million dollars (\$3,000,000).
- (i) A loan or loans under this section may be made to a consolidated city, a local public improvement bond bank, or any board, authority, or commission of the consolidated city, to fund economic development projects under IC 36-7-15.2-5 or to refund obligations issued to fund economic development projects. The amount of the loan may not exceed thirty million dollars (\$30,000,000).
- (j) A loan under this section may be made to a county having a population of more than thirteen thousand five hundred (13,500) but less than fourteen thousand (14,000) for extension of airport runways. The amount of the loan may not exceed three hundred thousand dollars (\$300,000).
- (k) A loan under this section may be made to Covington Community School Corporation to refund the amount due on a tax anticipation warrant loan. The amount of the loan may not exceed two million seven hundred thousand dollars (\$2,700,000), to be paid back from any source of money that is legally available to the school corporation. Notwithstanding subsection (b), the school

corporation must apply for the loan before June 30, 2010. Notwithstanding subsection (c), repayment of the loan shall be made in equal installments over five (5) years with the first installment due not more than six (6) months after the date loan proceeds are received by the school corporation.

- (k) (l) IC 6-1.1-20 does not apply to a loan made by an entity under this section.
- (1) (m) As used in this section, "entity" means a governmental entity authorized to obtain a loan under subsections (e) through (j). (k).

SECTION 55. IC 4-12-1-9.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 9.5. (a) As used in this section, "performance based budgeting" means a system of budgeting that uses statements of missions, goals, and objectives to explain why the money is being spent and allocates resources to specific objectives based on program goals and measured results.

- (b) The budget agency shall establish the forms and procedures to be used for a performance based budget and budget report, after review by the budget committee.
- (c) Beginning with the budget bill prepared for the biennium beginning July 1, 2011, state agencies shall submit to the budget agency information for the budget bill and budget report required under this chapter, and the budget agency and budget committee shall prepare each budget bill and budget report required under this chapter using a performance based budgeting system. Appropriation recommendations from the commission for higher education under IC 21-18-9-1 shall be submitted using a performance based budgeting system."

Page 125, between lines 4 and 5, begin a new paragraph and insert: "SECTION 59. IC 4-13.6-5-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 2. (a) Except as provided by this chapter and IC 16-33-4-10, IC 20-22.5-2-8, if the estimated cost of a public works project is at least seventy-five thousand dollars (\$75,000), the division shall award a contract for the project based on competitive bids.

(b) If the estimated cost of a public works project is at least seventy-five thousand dollars (\$75,000), the division shall develop contract documents for a public works contract and keep the contract

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documents on file in its offices so that they may be inspected by contractors and members of the public.

2.2.

- (c) The division shall advertise for bids under section 8 of this chapter. The director shall award a contract under IC 4-13.6-6.
- (d) A contractor shall submit under oath a financial statement as a part of the bid. The director may waive filing of the financial statement.
- (e) After bids are opened but before a contract is awarded, the director may require a contractor to submit a statement of the contractor's experience, a proposed plan of performing the work, and a listing of the equipment that is available to the contractor for performance of the work.
- (f) The statements required by this section shall be submitted on forms approved by the state board of accounts. The forms shall be based, so far as applicable, on standard questionnaires and financial statements for contractors used in investigating the qualifications of contractors on public construction work.
 - (g) The division shall reject the bid of a contractor if:
 - (1) the estimated cost of the public works project is one hundred fifty thousand dollars (\$150,000) or more and the contractor is not qualified under chapter 4 of this article;
 - (2) the estimated cost of the public works project is less than one hundred fifty thousand dollars (\$150,000) and the director makes a written determination, based upon information provided under subsections (d) and (e), that the contractor is not qualified to perform the public works contract;
 - (3) the contractor has failed to perform a previous contract with the state satisfactorily and has submitted the bid during a period of suspension imposed by the director (the failure of the contractor to perform a contract satisfactorily must be based upon a written determination by the director);
 - (4) the contractor has not complied with a rule adopted under this article and the rule specifies that failure to comply with it is a ground for rejection of a bid; or
 - (5) the contractor has not complied with any requirement under section 2.5 of this chapter.
- (h) The division shall keep a record of all bids. The state board of accounts shall approve the form of this record, and the record must include at least the following information:

1	(1) The name of each contractor.
2	(2) The amount bid by each contractor.
3	(3) The name of the contractor making the lowest bid.
4	(4) The name of the contractor to whom the contract was
5	awarded.
6	(5) The reason the contract was awarded to a contractor other than
7	the lowest bidder, if applicable.
8	(6) Purchase order numbers.".
9	Page 127, between lines 23 and 24, begin a new paragraph and
10	insert:
11	"SECTION 67. IC 5-10-8-8, AS AMENDED BY P.L.43-2007,
12	SECTION 12, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
13	JULY 1, 2009]: Sec. 8. (a) This section applies only to the state and
14	employees who are not covered by a plan established under section 6
15	of this chapter.
16	(b) After June 30, 1986, the state shall provide a group health
17	insurance plan to each retired employee:
18	(1) whose retirement date is:
19	(A) after June 29, 1986, for a retired employee who was a
20	member of the field examiners' retirement fund;
21	(B) after May 31, 1986, for a retired employee who was a
22	member of the Indiana state teachers' retirement fund; or
23	(C) after June 30, 1986, for a retired employee not covered by
24	clause (A) or (B);
25	(2) who will have reached fifty-five (55) years of age on or before
26	the employee's retirement date but who will not be eligible on that
27	date for Medicare coverage as prescribed by 42 U.S.C. 1395 et
28	seq.; and
29	(3) who:
30	(A) for an employee who retires before January 1, 2007, will
31	have completed:
32	(i) twenty (20) years of creditable employment with a public
33	employer on or before the employee's retirement date, ten
34	(10) years of which shall have been completed immediately
35	preceding the retirement; and
36	(ii) at least fifteen (15) years of participation in the
37	retirement plan of which the employee is a member on or
3.8	hefore the employee's retirement date: or

1	(B) for an employee who retires after December 31, 2006, will
2	have completed fifteen (15) years of creditable employment
3	with a public employer on or before the employee's retirement
4	date, ten (10) years of which shall have been completed
5	immediately preceding the retirement.
6	(c) The state shall provide a group health insurance program to each
7	retired employee:
8	(1) who is a retired judge;
9	(2) whose retirement date is after June 30, 1990;
10	(3) who is at least sixty-two (62) years of age;
11	(4) who is not eligible for Medicare coverage as prescribed by 42
12	U.S.C. 1395 et seq.; and
13	(5) who has at least eight (8) years of service credit as a
14	participant in the Indiana judges' retirement fund, with at least
15	eight (8) years of that service credit completed immediately
16	preceding the judge's retirement.
17	(d) The state shall provide a group health insurance program to each
18	retired employee:
19	(1) who is a retired participant under the prosecuting attorneys
20	retirement fund;
21	(2) whose retirement date is after January 1, 1990;
22	(3) who is at least sixty-two (62) years of age;
23	(4) who is not eligible for Medicare coverage as prescribed by 42
24	U.S.C. 1395 et seq.; and
25	(5) who has at least ten (10) years of service credit as a participant
26	in the prosecuting attorneys retirement fund, with at least ten (10)
27	years of that service credit completed immediately preceding the
28	participant's retirement.
29	(e) The state shall make available a group health insurance program
30	to each former member of the general assembly or surviving spouse of
31	each former member, if the former member:
32	(1) is no longer a member of the general assembly;
33	(2) is not eligible for Medicare coverage as prescribed by 42
34	U.S.C. 1395 et seq. or, in the case of a surviving spouse, the
35	surviving spouse is not eligible for Medicare coverage as
36	prescribed by 42 U.S.C. 1395 et seq.; and
37	(3) has at least ten (10) years of service credit as a member in the
38	general assembly.

A former member or surviving spouse of a former member who obtains insurance under this section is responsible for paying both the employer and the employee share of the cost of the coverage.

- (f) The group health insurance program required under subsections (b) through (e) and subsection (k) must be equal to that offered active employees. The retired employee may participate in the group health insurance program if the retired employee pays an amount equal to the employer's and the employee's premium for the group health insurance for an active employee and if the retired employee within ninety (90) days after the employee's retirement date files a written request for insurance coverage with the employer. Except as provided in subsection (l), the employer may elect to pay any part of the retired employee's premium with respect to insurance coverage under this chapter.
- (g) Except as provided in subsection (j), a retired employee's eligibility to continue insurance under this section ends when the employee becomes eligible for Medicare coverage as prescribed by 42 U.S.C. 1395 et seq., or when the employer terminates the health insurance program. A retired employee who is eligible for insurance coverage under this section may elect to have the employee's spouse covered under the health insurance program at the time the employee retires. If a retired employee's spouse pays the amount the retired employee would have been required to pay for coverage selected by the spouse, the spouse's subsequent eligibility to continue insurance under this section is not affected by the death of the retired employee. The surviving spouse's eligibility ends on the earliest of the following:
 - (1) When the spouse becomes eligible for Medicare coverage as prescribed by 42 U.S.C. 1395 et seq.
 - (2) When the employer terminates the health insurance program.
 - (3) Two (2) years after the date of the employee's death.
 - (4) The date of the spouse's remarriage.
- (h) This subsection does not apply to an employee who is entitled to group insurance coverage under IC 20-28-10-2(b). An employee who is on leave without pay is entitled to participate for ninety (90) days in any health insurance program maintained by the employer for active employees if the employee pays an amount equal to the total of the employer's and the employee's premiums for the insurance.
- (i) An employer may provide group health insurance for retired

employees or their spouses not covered by this section and may provide group health insurance that contains provisions more favorable to retired employees and their spouses than required by this section. A public employer may provide group health insurance to an employee who is on leave without pay for a longer period than required by subsection (h).

- (j) An employer may elect to permit former employees and their spouses, including surviving spouses, to continue to participate in a group health insurance program under this chapter after the former employee (who is otherwise qualified under this chapter to participate in a group insurance program) or spouse has become eligible for Medicare coverage as prescribed by 42 U.S.C. 1395 et seq. An employer who makes an election under this section may require a person who continues coverage under this subsection to participate in a retiree health benefit plan developed under section 8.3 of this chapter.
- (k) The state shall provide a group health insurance program to each retired employee:
 - (1) who was employed as a teacher in a state institution under:

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(A) IC 11-10-5;
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20 (B) IC 12-24-3;

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21 (C) IC 16-33-3;

22 (D) IC 16-33-4 (before its repeal);

23 (E) IC 20-21-2-1; or

24 (F) IC 20-22-2-1; **or**

25 **(G) IC 20-22.5-2**;

- (2) who is at least fifty-five (55) years of age on or before the employee's retirement date;
- 28 (3) who is not eligible for Medicare coverage as prescribed by 42
- 29 U.S.C. 1395 et seq.; and
- 30 (4) who:
- 31 (A) has at least fifteen (15) years of service credit as a 32 participant in the retirement fund of which the employee is a 33 member on or before the employee's retirement date; or
- 34 (B) completes at least ten (10) years of service credit as a 35 participant in the retirement fund of which the employee is a 36 member immediately before the employee's retirement.
- 37 (1) The president pro tempore of the senate and the speaker of the 38 house of representatives may not elect to pay any part of the premium

for insurance coverage under this chapter for a former member of the general assembly or the spouse of a former member of the general assembly whose last day of service as a member of the general assembly is after July 31, 2007.".

Page 128, between lines 21 and 22, begin a new paragraph and insert:

"SECTION 67. IC 5-13-12-12, IS ADDED BY TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 12. (a) As used in this section, "authority" refers to the Indiana finance authority created by IC 4-4-11.

- (b) In addition to the board's other powers under this chapter, the board, upon a written finding by the authority as described in subsection (c), may provide:
 - (1) a loan payment guarantee or direct loan to or for the benefit of a supplier, contractor, or subcontractor for a redevelopment project described in subsection (c); and
 - (2) a direct loan to a county having a population of more than sixteen thousand (16,000) but less than sixteen thousand seven hundred (16,700) to fund an economic development project under IC 36-7-14 described in IC 5-28-30-17.5 or to refund obligations issued to fund such an economic development project.
- (c) The authority may make a written finding that the guarantee of a particular loan or a direct loan to or for the benefit of a supplier, contractor, or subcontractor and to a county having a population of more than sixteen thousand (16,000) but less than sixteen thousand seven hundred (16,700) for a redevelopment project in the county for which:
 - (1) bankruptcy was declared with respect to the project before January 1, 2009;
 - (2) the estimated value of the project or operation before bankruptcy was declared was at least five hundred million dollars (\$500,000,000);
- (3) the estimated number of employees upon completion of the project or operation was expected to be at least one thousand two hundred (1,200) persons; and
- 38 (4) the proposed borrower or lessee cannot obtain the loan

1	guarantee or direct loan upon reasonable terms;
2	would tend to accomplish the purposes of this section, including the
3	creation or retention of employment in Indiana through the
4	guarantee of a loan or the making of a direct loan.
5	(d) Loan guarantees or direct loans made under this section are
6	subject to the following conditions:
7	(1) The principal amount of all loan guarantees and direct
8	loans may not exceed:
9	(A) a combined total of forty-eight million dollars
10	(\$48,000,000) for all suppliers, contractors, or
11	subcontractors;
12	(B) nine million eight hundred thousand dollars
13	(\$9,800,000) to a particular supplier, contractor, or
14	subcontractor; and
15	(C) four million two hundred thousand dollars (\$4,200,000)
16	to a county having a population of more than sixteen
17	thousand (16,000) but less than sixteen thousand seven
18	hundred (16,700).
19	(2) With respect to any loan guarantee or direct loan made
20	under this section, an agreement with the board must contain
21	the following terms:
22	(A) A requirement that the proceeds under a loan being
23	guaranteed or direct loan proceeds be used for specified
24	purposes consistent with and in furtherance of the
25	purposes of the corporation under this section.
26	(B) The term of the guarantee or loan, which may not be
27	later than three (3) years from the date of the loan.
28	(C) The repayment schedule for a direct loan.
29	(D) The interest rate or rates of the direct loan, which may
30	include variations in the rate, but which may not be less
31	than the amount necessary to cover all expenses of the
32	board in making the loan.
33	(E) Any other terms and provisions that the board or the
34	authority requires.
35	(3) An agreement under this section may also contain a
36	requirement that the loan be insured directly or indirectly by
37	a loan insurer or be guaranteed by a loan guarantor, and a
38	requirement of any other type or types of security or

17 1 collateral that the authority and board consider reasonable or 2 necessary. (4) A loan guarantee or a direct loan made under this section 3 4 may be sold by the board, and the board may permit other 5 lenders to participate in a loan made under this section, at the time or times and upon the terms and conditions that the board considers reasonable or necessary. A loan sold or in 8 which other lenders participate may be guaranteed by the 9 board, upon terms and conditions established by the board. 10 (5) The loan guarantee or direct loan by the board for 11 depositories must be recommended by the authority upon the 12 authority's determination and certification to the board for 13 depositories: 14 (A) that the loan guarantee or direct loan will be for a 15 supplier, contractor, or subcontractor or the county for a 16 redevelopment project described in this section; and 17 (B) that the loan guarantee or direct loan is necessary for 18 a redevelopment project described in this section to be

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- eventually completed.

 (6) Banks and financial institutions designated as eligible to receive public funds by the board for depositories shall be given a preference to provide the loan or other form of commercial financing to be guaranteed under this section, if such banks or financial institutions can provide terms and conditions for the loan that are substantially similar to and no more costly than the terms and conditions available to a leading Indiana business from other banks or commercial lending institutions.
- (7) The board shall determine the guarantee premium to be received by the public deposit insurance fund for a loan guarantee. The guarantee premium shall be determined at the market rate then in effect for guarantees, mortgage insurance rates, or letters of credit used for similar purposes.
- (e) Members of the board for depositories and any officers or employees of the board for depositories are not subject to personal liability or accountability for or by reason of a loan guarantee made under this section.
- (f) This section constitutes all the authority required for the

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board for depositories to make a loan guarantee under this section.

This section is in addition and not in limitation of the board's other powers under this chapter.

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(g) Any claim, loss, or debt arising out of any joint guarantee under this section is the obligation of the board for depositories or the authority, payable out of the public deposit insurance fund or a fund administered by the authority, as special funds only and as provided in this section, and does not constitute a debt, liability, or obligation of the state or a pledge of the faith and credit of the state. The document evidencing any guarantee must have on its face the words, "The obligations created by this guarantee (or other document as appropriate) do not constitute a debt, liability, or obligation of the state or a pledge of the faith and credit of the state, but are obligations of the Board for Depositories or the Indiana Finance Authority and are payable solely out of the funds provided therefor, as special funds, and neither the faith and credit nor the taxing power of the state is pledged to the payment of any obligation hereunder.".

(f) This section expires December 31, 2015.".

Page 128, delete lines 22 through 35, begin a new paragraph and insert:

"SECTION 67. IC 5-22-1-2, AS AMENDED BY P.L.217-2007, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 2. Except as provided in this article, this article does not apply to the following:

- (1) The commission for higher education.
- 27 (2) A state educational institution. However, IC 5-22-5-9 and IC 5-22-15 apply to a state educational institution.
 - (3) Military officers and military and armory boards of the state.
- 30 (4) An entity established by the general assembly as a body 31 corporate and politic. However, IC 5-22-15 applies to a body 32 corporate and politic.
- 33 (5) A local hospital authority under IC 5-1-4.
- 34 (6) A municipally owned utility under IC 8-1-11.1 or IC 8-1.5.
- 35 (7) Hospitals established and operated under IC 16-22-1 through
- 36 IC 16-22-5, IC 16-22-8, IC 16-23-1, or IC 16-24-1.
- 37 (8) A library board under IC 36-12-3-16(b).
- 38 (9) A local housing authority under IC 36-7-18.

1	(10) Tax exempt Indiana nonprofit corporations leasing and
2	operating a city market owned by a political subdivision.
3	(11) A person paying for a purchase or lease with funds other than
4	public funds.
5	(12) A person that has entered into an agreement with a
6	governmental body under IC 5-23.
7	(13) A municipality for the operation of municipal facilities used
8	for the collection, treatment, purification, and disposal in a
9	sanitary manner of liquid and solid waste, sewage, night soil, and
10	industrial waste.
11	(14) The department of financial institutions established by
12	IC 28-11-1-1.
13	(15) The commissioner of the department of insurance in
14	retaining an examiner for purposes of IC 27-1-3.1-9.
15	SECTION 69. IC 5-22-12-1 IS AMENDED TO READ AS
16	FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 1. This chapter applies
17	only to the following governmental bodies:
18	(1) A state institution (as defined in IC 12-7-2-184).
19	(2) A penal facility operated by the department of correction.
20	(3) An institution operated by the state department of health The
21	Indiana Soldiers' and Sailors' Children's Home under
22	IC 16-19-6. IC 20-22.5.
23	(4) A political subdivision.
24	SECTION 70. IC 5-28-15-10, AS ADDED BY P.L.4-2005,
25	SECTION 34, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
26	DECEMBER 1, 2008 (RETROACTIVE)]: Sec. 10. (a) Subject to
27	subsection (b), an enterprise zone expires ten (10) years after the day
28	on which it is designated by the board.
29	(b) In the period beginning December 1, 2008, and ending
30	December 31, 2014, an enterprise zone does not expire under this
31	section if the fiscal body of the municipality in which the enterprise
32	zone is located adopts a resolution renewing the enterprise zone for
33	an additional five (5) years. An enterprise zone may be renewed
34	under this subsection regardless of the number of times the
35	enterprise zone has been renewed under subsections (c) and (d). A
36	municipal fiscal body may adopt a renewal resolution and submit
37	a copy of the resolution to the board:

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(1) before August 1, 2009, in the case of an enterprise zone

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1 that expired after November 30, 2008, or is scheduled to 2 expire before September 1, 2009; or 3 (2) at least thirty (30) days before the expiration date of the 4 enterprise zone, in the case of an enterprise zone scheduled to 5 expire after August 31, 2009. If an enterprise zone is renewed under this subsection after having 7 been renewed under subsection (d), the enterprise zone may not be 8 renewed after the expiration of this final five (5) year period. 9 (c) The two (2) year period immediately before the day on which the 10 enterprise zone expires is the phaseout period. During the phaseout 11 period, the board may review the success of the enterprise zone based 12 on the following criteria and may, with the consent of the budget 13 committee, renew the enterprise zone, including all provisions of this 14 chapter, for five (5) years: 15 (1) Increases in capital investment in the zone. 16 (2) Retention of jobs and creation of jobs in the zone. 17 (3) Increases in employment opportunities for residents of the 18 zone. 19 (b) (d) If an enterprise zone is renewed under subsection (a), the two 20 (2) year period immediately before the day on which the enterprise 21 zone expires is another phaseout period. During the phaseout period, 22 the board may review the success of the enterprise zone based on the 23 criteria set forth in subsection (a) and, with the consent of the budget 24 committee, may again renew the enterprise zone, including all 25 provisions of this chapter, for a final period of five (5) years. The zone 26 may not be renewed after the expiration of this final five (5) year 27 period.". 28 Page 130, delete lines 10 through 48. 29 Page 131, delete lines 1 through 7. 30 Page 131, delete lines 17 through 28 and insert: "SECTION 74. IC 6-1.1-1-8.4, AS ADDED BY P.L.146-2008, 31 32 SECTION 47, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 33 JANUARY 1, 2009 (RETROACTIVE)]: Sec. 8.4. (a) "Inventory" 34 means: 35 (1) materials held for processing or for use in production; 36 (2) finished or partially finished goods of a manufacturer or 37 processor; and

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(3) property held for sale in the ordinary course of trade or

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1	business.
2	(b) The term includes:
3	(1) items that qualify as inventory under 50 IAC 4.2-5-1 (as
4	effective December 31, 2008); and
5	(2) subject to subsection (c), a mobile home that:
6	(A) does not qualify as real property;
7	(B) is located in a mobile home community;
8	(C) is unoccupied; and
9	(D) is:
10	(i) owned and held for sale by the owner of the mobile
11	home community; or
12	(ii) owned by a person other than the owner of the
13	mobile home community and held for sale by the owner
14	of the mobile home.
15	(c) Subsection (b)(2) applies regardless of whether the mobile
16	home that is held for sale is new or was previously owned.".
17	Page 194, between lines 1 and 2, begin a new paragraph and insert:
18	"SECTION 148. IC 6-1.1-21.3 IS ADDED TO THE INDIANA
19	CODE AS A NEW CHAPTER TO READ AS FOLLOWS
20	[EFFECTIVE UPON PASSAGE]:
21	Chapter 21.3. Rainy Day Fund Loans to Eligible Taxing Units
22	Sec. 1. As used in this chapter, "board" refers to the state board
23	of finance.
24	Sec. 2. As used in this chapter, "eligible taxing unit" refers to a
25	taxing unit located in LaPorte County.
26	Sec. 3. The general assembly finds that:
27	(1) distributions of property tax revenue for 2008 and 2009 to
28	the taxing units in LaPorte County either:
29	(A) have not been made; or
30	(B) have been delayed by more than sixty (60) days after
31	either due date specified in IC 6-1.1-22-9;
32	as a result of a state ordered reassessment of property in the
33	county; and
34	(2) the taxing units are having severe difficulty carrying out
35	the governmental functions committed to them by law as a
36	result of the delay in the distribution of tax revenue to the
37	taxing units.
3.8	Sec. 4. An eligible taxing unit, with the approval of the fiscal

body of the eligible taxing unit, may apply to the board for an
 interest free loan from the counter-cyclical revenue and economic
 stabilization fund.

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- Sec. 5. Subject to this chapter, the board, after review by the budget committee, shall determine the terms of any loan made under this chapter.
- Sec. 6. Interest may be imposed on the loan at a rate determined by the board.
- Sec. 7. The total amount of all loans under this chapter for all calendar years may not exceed the least of the following:
 - (1) The amount requested by the eligible taxing units.
 - (2) The amount of revenue that the board determines has not been collected from property taxes in 2008 and 2009 on the date of the loan.
 - (3) Thirty-six million dollars (\$36,000,000).
- Sec. 8. An eligible taxing unit receiving a loan under this chapter must repay the loan within seventy-two (72) months after the date on which the loan is made. No penalty may be imposed for repaying a loan before the term of the loan.
- Sec. 9. The board may disburse in installments the proceeds of a loan made under this chapter.
- Sec. 10. An eligible taxing unit may repay a loan made under this chapter from any sources of revenue.
- Sec. 11. The obligation to repay a loan made under this chapter is not a basis for an eligible taxing unit to obtain an excessive tax levy under IC 6-1.1-19.
- Sec. 12. Whenever the board receives a payment on a loan made under this chapter, the board shall deposit the amount paid in the counter-cyclical revenue and economic stabilization fund.
- Sec. 13. The proceeds of a loan received by an eligible taxing unit under this chapter are not considered to be part of the ad valorem property tax levy actually collected by the eligible taxing unit for taxes first due and payable during a particular calendar year for the purpose of calculating levy excess.
- Sec. 14. The notes and the authorization, issuance, sale, and delivery of the notes are not subject to any general statute concerning obligations issued by the local governmental entity borrower. This chapter contains full and complete authority for

the making of the loan, the authorization, issuance, sale, and delivery of the notes, and the repayment of the loan by the borrower, and no law, procedure, proceedings, publications, notices, consents, approvals, orders, or acts by any officer, department, agency, or instrument of the state or of any political subdivision is required to make the loan, issue the notes, or repay the loan except as prescribed in this chapter.

Sec. 15. Upon the failure of an eligible taxing unit to make any of the eligible taxing unit's payments on a loan granted under this chapter when due, the treasurer of state, upon being notified of the failure by the board, may pay the unpaid amount that is due from the funds held by the state that would be otherwise distributable to the taxing unit.

SECTION 149. IC 6-1.1-21.9-1, AS ADDED BY P.L.114-2006, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 1. (a) As used in this chapter, "board" refers to the state board of finance.

- (b) As used in this chapter, "qualified taxing unit" means a taxing unit:
 - (1) in which a qualifying taxpayer has tangible property subject to taxation; and
 - (2) that has experienced or is expected to experience a significant revenue shortfall as a result of a default or an expected default described in subsection (c)(3).
- (c) As used in this chapter, "qualifying taxpayer" means a taxpayer that:
 - (1) manufactures microelectronics **or motor vehicles** as part of its business;
 - (2) has filed a petition to reorganize **or another form of petition** under the federal bankruptcy code; and
- (3) has defaulted, or has notified the county fiscal body of the county in which the taxpayer is subject to property taxes that the taxpayer will default, on all or part of one (1) or more of its property tax payments.

35 SECTION 150. IC 6-1.1-21.9-3, AS AMENDED BY P.L.1-2009, 36 SECTION 45, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 37 UPON PASSAGE]: Sec. 3. (a) The board, not later than December 31,

38 2009, **2010,** and after review by the budget committee, shall determine

I	the terms of a toan all loans made under this chapter, subject to the
2	following:
3	(1) The board may not charge interest on the loan.
4	(2) The loan must be repaid not later than ten (10) years after the
5	date on which the loan was made.
6	(3) The terms of the loan must allow for prepayment of the loan
7	without penalty.
8	(4) The maximum amount of the loan that a qualifying taxing unit
9	may receive with respect to a default described in section 1(c)(3)
.0	of this chapter on one (1) or more payments of property taxes first
1	due and payable in a calendar year is the amount, as determined
2	by the board, of revenue shortfall for the qualifying taxing unit
3	that results from the default for that calendar year.
4	(5) The total amount of all loans under this chapter for all
.5	calendar years may not exceed:
6	(A) thirteen million dollars (\$13,000,000) related to a default
7	of a taxpayer that manufactures microelectronics as part
8	of its business but does not manufacture motor vehicles;
9	and
20	(B) thirty-four million dollars (\$34,000,000) related to a
21	default of a taxpayer that manufactures motor vehicles as
22	part of its business.
23	(b) The board may disburse in installments the proceeds of a loan
24	made under this chapter.
25	(c) A qualified taxing unit may repay a loan made under this chapter
26	from any of the following:
27	(1) Property tax revenues of the qualified taxing unit that are
28	subject to the levy limitations imposed by IC 6-1.1-18.5 or (before
29	January 1, 2009) IC 6-1.1-19.
30	(2) Property tax revenues of the qualified taxing unit that are not
31	subject to levy limitations as provided in IC 6-1.1-18.5-21 or
32	(before January 1, 2009) IC 6-1.1-19-13.
33	(3) The qualified taxing unit's debt service fund.
34	(4) Any other source of revenues (other than property taxes) that
35	is legally available to the qualified taxing unit.
66	The payment of any installment on a loan made under this chapter
37	constitutes a first charge against the property tax revenues described in
8	subdivision (1) or (2) that are collected by the qualified taxing unit

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during the calendar year the installment is due and payable.

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2 (d) The obligation to repay a loan made under this chapter is not a 3 basis for the qualified taxing unit to obtain an excessive tax levy under 4 IC 6-1.1-18.5 or (before January 1, 2009) IC 6-1.1-19. 5 (e) Whenever the board receives a payment on a loan made under this chapter, the board shall deposit the amount paid in the 7 counter-cyclical revenue and economic stabilization fund.". 8 Page 209, between lines 34 and 35, begin a new paragraph and 9 insert: 10 "SECTION 172. IC 6-2.5-5-16.5, AS AMENDED BY P.L.32-2007, SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 11 12 JULY 1, 2009]: Sec. 16.5. (a) The following definitions apply 13 throughout this section: 14 (1) "Home energy" means electricity, oil, gas, coal, propane, or 15 any other fuel for use as the principal source of heating or cooling 16 in residential dwellings. 17 (2) "Home energy assistance" means programs administered by 18 the state to supply home energy through the Low Income Home 19 Energy Assistance Block Grant under 42 U.S.C. 8261 et seq. 20 (b) Transactions involving home energy are exempt from the state 21 gross retail tax if the person acquiring the home energy acquires it after 2.2. June 30, 2006 and before July 1, 2009, through home energy 23 assistance.". 24 Page 210, between lines 18 and 19, begin a new paragraph and 25 insert: "SECTION 174. IC 6-2.5-5-39, AS AMENDED BY P.L.211-2007, 26 27 SECTION 15, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 28 JULY 1, 2009]: Sec. 39. (a) As used in this section, "cargo trailer" 29 means a vehicle: 30 (1) without motive power; 31 (2) designed for carrying property; 32 (3) designed for being drawn by a motor vehicle; and 33 (4) having a gross vehicle weight rating of at least two thousand 34 two hundred (2,200) pounds. 35 (b) As used in this section, "recreational vehicle" means a vehicle 36 with or without motive power equipped exclusively for living quarters 37 for persons traveling upon the highways. The term includes a travel 38 trailer, a motor home, a truck camper with a floor and facilities

1 enabling it to be used as a dwelling, and a fifth wheel trailer. 2 (c) This subsection applies to a transaction that is not subject to 3 the exemption provided by subsection (f). A transaction involving a 4 cargo trailer or a recreational vehicle is exempt from the state gross 5 retail tax if: (1) the purchaser is a nonresident; 7 (2) upon receiving delivery of the cargo trailer or recreational 8 vehicle, the person transports it within thirty (30) days to a 9 destination outside Indiana; 10 (3) the cargo trailer or recreational vehicle will be titled or 11 registered for use in another state or country; 12 (4) the cargo trailer or recreational vehicle will not be titled or 13 registered for use in Indiana; and (5) the cargo trailer or recreational vehicle will be titled or 14 registered in a state or country that provides an exemption 15 from sales, use, or similar taxes imposed on a cargo trailer 16 17 or recreational vehicle that is purchased in that state or 18 country by an Indiana resident and will be titled or registered in Indiana. 19 20 A transaction involving a cargo trailer or recreational vehicle that does 21 not meet the requirements of subdivision (5) is not exempt from the 22 state gross retail tax. 23 (d) This subsection applies only to a transaction that is subject 24 to the exemption provided by subsection (c). A purchaser must claim 25 an exemption under this section subsection (c) by submitting to the 26 retail merchant an affidavit stating the purchaser's intent to: 27 (1) transport the cargo trailer or recreational vehicle to a destination outside Indiana within thirty (30) days after delivery; 28 29 and 30 (2) title or register the cargo trailer or recreational vehicle for use 31 in another state or country. 32 The department shall prescribe the form of the affidavit, which must 33 include an affirmation by the purchaser under the penalties for perjury 34 that the information contained in the affidavit is true. The affidavit 35 must identify the state or country in which the cargo trailer or 36 recreational vehicle will be titled or registered.

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(e) The department shall provide the information necessary to

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I	determine a purchaser's engionity for an exemption claimed under this
2	section to retail merchants in the business of selling cargo trailers or
3	recreational vehicles.
4	(e) The gross retail income derived from the sale of a
5	recreational vehicle is exempt from the state gross retail tax if each
6	of the following requirements are satisfied:
7	(1) The recreational vehicle is new and has not been titled or
8	registered for use in Indiana or any other state or country.
9	(2) The recreational vehicle was built in Indiana.
10	(3) The seller of the recreational vehicle is an Indiana licensed
11	dealer of recreational vehicles.
12	(4) The purchaser of the recreational vehicle is an Indiana
13	resident.
14	(5) The purchaser of the recreational vehicle signs a purchase
15	agreement and makes a down payment at a recreational
16	vehicle show that is:
17	(A) hosted by a nonprofit organization organized under the
18	laws of Indiana; and
19	(B) open to the public for not more than five (5)
20	consecutive days.".
21	Page 229, delete lines 3 through 12, begin a new paragraph and
22	insert:
23	"SECTION 194. IC 6-3.1-30-2, AS AMENDED BY P.L.137-2006,
24	SECTION 8, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
25	JULY 1, 2009]: Sec. 2. As used in this chapter, "eligible business"
26	means a business that:
27	(1) is engaged in either interstate or intrastate commerce;
28	(2) maintains a corporate headquarters at a location outside
29	Indiana;
30	(3) has not previously maintained a corporate headquarters at a
31	location in Indiana;
32	(4) had annual worldwide revenues of at least:
33	(A) one hundred ten million dollars (\$100,000,000)
34	(\$10,000,000) in the case of a business that relocates to
35	Elkhart County before July 1, 2010; or
36	(B) twenty million dollars (\$20,000,000) in the case of a
37	business that is not described in clause (A);
38	for the taxable year immediately preceding the business's

application for a tax credit under section 12 of this chapter; and
(5) commits contractually to relocating its corporate headquarters
to Indiana.".

Page 285, between lines 34 and 35, begin a new paragraph and insert:

"SECTION 260. IC 8-1-2.3-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 2. (a) The definitions in this section apply throughout this chapter.

- (b) "Electricity supplier" means a public utility, a local district rural electric membership corporation, or a municipally owned electric utility which furnishes retail electric service to the public. A municipally owned electric utility that enters into a lease agreement with another electricity supplier under which the other electricity supplier furnishes retail electric service to customers of the municipally owned electric utility is considered to furnish retail electric service to the public for purposes of this subsection.
- (c) "Retail electric service" means electric service furnished to a customer for ultimate consumption, but does not include wholesale electric service furnished by an electricity supplier to another electricity supplier for resale.
- (d) "Existing electric distribution line" means an electric conductor which on January 1, 1979, was being used for the distribution or delivery of retail electric service.
- (e) "Assigned service area" means the designated geographic area within the boundaries of which an electricity supplier is authorized to furnish all retail electric service, as provided in this chapter.
 - (f) "Municipality" means a city or town.
- (g) "Existing municipal limits" means the corporate boundaries of any municipality as such boundaries existed on January 1, 1979.

SECTION 261. IC 8-1-2.3-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 3. Assigned Service Areas. (a) Unless otherwise agreed upon between adjacent electricity suppliers, and subject to section 6(4) of this chapter, all areas inside existing municipal limits are hereby assigned to the electricity supplier serving a plurality of the electric meters within the municipality on January 1, 1979.

(b) Where two (2) or more electricity suppliers are rendering retail electric service within existing municipal limits, those suppliers shall

take one (1) or more of the following actions to assure that only one (1) electricity supplier shall serve within the existing municipal limits:

- (1) The electricity supplier serving a plurality of electric meters within the municipality on January 1, 1979, may purchase the electric utility property of any other electricity supplier which is devoted to retail electric service and is located within the existing municipal limits, at its then reproduction cost new depreciated value plus severance damages.
- (2) At the option of the electricity supplier serving a plurality of electric meters within the municipality on January 1, 1979, and subject to commission approval, the electricity suppliers may exchange all or part of the electric utility property located outside of the existing municipal limits for the electric utility property located within the existing municipal limits.
- (3) If the affected electricity suppliers do not agree upon a purchase or exchange of the electric utility property before September 1, 1980, the commission shall determine the appropriate purchase price for the electric utility property according to subsection (b)(1) of this section. subdivision (1).
- (c) On or before July 1, 1981, each electricity supplier in each county shall exchange with all other electricity suppliers in the county a map or maps showing all of its existing electric distribution lines in the county which are relevant to the assignment of service areas outside existing municipal limits and any other information it considers useful in determining the boundaries of an assigned service area.
- (d) Until otherwise agreed upon between electricity suppliers or ordered by the commission under section 3(g) of this chapter, subsection (g), the boundaries of the assigned service area for each adjacent electricity supplier outside existing municipal limits shall be set as a line equidistant from its existing electric distribution lines and the nearest existing electric distribution lines of any other electricity supplier; the resulting assigned service area outside existing municipal limits of an electricity supplier will be that area which is closer to the existing electric distribution lines of a supplier than to the existing electric distribution lines of any other electricity supplier.
- (e) Each electricity supplier shall negotiate with all adjacent electricity suppliers as soon as practicable in an effort to agree on the boundaries of the service areas to be assigned.

(f) Maps depicting the boundaries of such proposed service area assignments shall be prepared by each electricity supplier for each county in which the electricity supplier provides electric retail service, and shall be filed, together with a petition requesting approval and assignment of such service areas with the commission on or before July 1, 1982, or on such other date as the commission may determine, but in any event on or before March 1, 1983. Thereafter, the commission shall hold a public hearing regarding the proposed service areas, after publication of notice of the hearing at least ten (10) days before the hearing in the county or counties in which such proposed service areas are located. If the commission finds that the proposed service areas comply with this chapter, it shall issue an order within twelve (12) months of the filing of the petition and related maps, approving and assigning the service areas as designated on the prepared maps.

(g) If two (2) or more adjacent electricity suppliers cannot agree upon the boundary line or lines between their respective proposed service areas on or before July 1, 1982, or such other date as the commission may determine, but in any event on or before March 1, 1983, the commission on its own motion or upon petition of one (1) of the electricity suppliers shall hold a public hearing regarding the location of the boundary line or lines, after publication of notice of the hearing at least ten (10) days before the hearing in the county or counties in which the boundary line or lines are located. The commission shall determine the boundary line or lines based as nearly as practicable upon a line equidistant between the existing electric distribution lines of the adjacent electricity suppliers, consistent with good utility practice and public convenience and necessity. The commission shall issue an order determining the boundary line or lines and assigning the service areas, and shall direct the parties to file with the commission maps showing such assigned service areas. If the commission determines that the maps comply with its order, it shall issue a supplemental order approving the assigned service areas as designated on the maps.

(h) Once established according to this section, the boundaries of assigned service areas may not be changed except as provided in section 6 of this chapter.

SECTION 262. IC 8-1-2.3-6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 6. The boundaries

of the assigned service areas of electricity suppliers may not be changed except under any one (1) of the following circumstances:

(1) If a municipality which owns and operates an electric utility system furnishing retail electric service to the public annexes an area beyond the assigned service area of its municipally owned electric utility, the municipally owned electric utility may petition the commission to change the assigned service area of the municipally owned electric utility to include the annexed area, according to the following procedures:

(A) The municipally owned electric utility shall file its petition with the commission not later than sixty (60) days after the annexation becomes effective. The petition must include a certified copy of the annexation ordinance, which serves as conclusive evidence that the area has been lawfully annexed and is part of the municipality. After the filing of a petition under this subdivision, the commission shall promptly enter an order changing the assigned service area facet maps of the municipally owned electric utility and incumbent electricity suppliers to include the annexed area within the assigned service area of the municipally owned electric utility and giving the right to serve and immediate possession to the municipally owned electric utility. The commission order is enforceable in court pending an appeal of that order. An appellant from a court order enforcing a commission order under this subdivision is not entitled to a stay of the court order pending appeal. However, this subdivision does not apply to incorporations, consolidations, mergers, or annexations that are under IC 36-4-3-4(a)(3), IC 36-4-3-4(b), IC 36-4-3-4(h), or IC 36-4-3-4.1 or that are not contiguous under IC 36-4-3-13(b) or IC 36-4-3-13(c).

(B) Not later than thirty (30) days after filing a petition under this subdivision, the municipally owned electric utility shall determine for each affected incumbent electricity supplier and pay to that supplier an amount not less than the value of all the electric utility property of the incumbent electricity supplier that is devoted to furnishing retail electric service within the additional assigned service area at its then reproduction cost new depreciated value. In addition, the municipally owned

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electric utility shall pay the incumbent electricity supplier severance damages in an amount equal to:

- (i) the value of the incumbent electricity supplier's distribution and substation facilities dedicated to and located within the annexed area or relocated by reason of the annexation or an amount equal to two and one-half (2 1/2) times the incumbent electricity supplier's gross revenues from electricity sales in the annexed area during the twelve (12) month period immediately preceding the date the annexation ordinance became effective, whichever is greater; plus
- (ii) if additional permanent service locations or service accounts are established in the annexed area during the five (5) year period beginning on the effective date of the annexation ordinance, one-tenth of one cent (\$0.001) for each kilowatt hour of electricity sold to each of those permanent service locations or service accounts for sales that occur during a five (5) year period beginning on the date each service location or service account is established, up to a maximum of one hundred seventy thousand (170,000) kilowatt hours per service account or service location for each monthly billing period.

However, the municipally owned electric utility is not required to pay severance damages under item (ii) if, at the time each annual payment otherwise would accrue, it is purchasing all of its requirements for electric power and energy, except for generation directly provided by the municipally owned electric utility or by a customer, from the incumbent electricity supplier. Severance damages must be paid not later than thirty (30) days after the end of each calendar year in which severance damages have accrued. The municipally owned electric utility and incumbent electricity suppliers shall cooperate to calculate the amount of any severance damages and shall furnish to each other all information and records reasonably necessary for the determination and verification of severance damages. If the municipally owned electric utility and incumbent electricity suppliers cannot agree on the amount of severance damages the municipally owned electric

1 utility is to pay, the commission shall determine the amount 2 and order payment in accordance with this clause. Not later 3 than twenty (20) days after making a payment, the municipally 4 owned electric utility shall certify to the commission and to 5 any affected incumbent electricity supplier that it has paid the amounts required under this clause. 6 7 (C) If the municipally owned electric utility fails to make a 8 payment under clause (B), an affected incumbent electricity 9 supplier may, not later than sixty (60) days after the payment 10 is due and after giving the municipally owned electric utility 11 reasonable notice of and an opportunity to cure the defect, file 12 with the commission a petition alleging that a payment due under clause (B) has not been made. If the commission finds 13 14 after notice and hearing that any payments owed to the 15 incumbent electricity supplier have not been timely and fully paid, the commission shall order the municipally owned 16 17 electric utility to pay: 18 (i) the delinquent payments by a date determined by the 19 commission; 20 (ii) accrued interest at the rate set forth in IC 24-4.6-1-102; 21 2.2. (iii) the incumbent electricity supplier's costs of filing and 23 prosecuting a petition under this clause. 24 If the commission finds against the incumbent electricity 25 supplier, it shall order the incumbent electricity supplier to pay 26 the costs incurred by the municipally owned electric utility in 27 defending against the incumbent electricity supplier's petition. 28 (D) A certified copy of a final commission order that: 29 (i) determines and orders the payment of severance damages 30 under clause (B); or 31 (ii) orders the payment of delinquent payments, interest, and 32 costs under clause (C); 33 may be filed with the clerk of the circuit or superior court of 34 any county in which part or all of the annexed area is located. 35 A commission order that is filed in a court under this clause 36 may be enforced and executed in the same manner as if it were 37 a final judgment of that court.

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(2) Upon mutual agreement of the affected electricity suppliers

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and approval of the commission. If notice of a verified request for a change of boundary lines by mutual agreement under this subdivision is published in a newspaper of general circulation in every county in which the boundary lines are located and an affected electricity customer does not request a hearing within twenty (20) days of the last date of publication, the commission may approve the change without a hearing. The commission shall approve a boundary line change under this subdivision unless the commission finds, after a public hearing, that the change would cause:

- (A) duplication of electric utility facilities;
- (B) waste of materials or resources; or
- (C) uneconomic, inefficient, or inadequate electric service to the public.
- (3) In the case where a landowner owns a single tract of land that is intersected by the boundary lines of two (2) or more assigned service areas, and retail electric service can best be supplied by only one (1) electricity supplier, or in the case where a customer or customers are housed in a single structure or constitute a single governmental, industrial, or institutional operation, and the electricity suppliers involved are unable to agree which shall furnish the electric service, any of the electricity suppliers may submit the matter to the commission for its determination based upon public convenience and necessity. If, after notice and hearing, the commission determines that one (1) or more electricity suppliers are to supply the required retail electric service and the boundaries of an assigned service area are to be changed, the assigned service area maps of the electricity suppliers shall be changed to reflect the new boundaries.
- (4) By order of the commission upon the termination of a lease agreement between a municipally owned electric utility and a public utility. If, before January 1, 1979, a municipality that owns and operates an electric utility system furnishing retail electric service to the public enters into a lease agreement with a public utility under which the public utility furnishes retail electric service to customers of the municipally owned utility, and, after December 31, 1978, the municipality is located within the assigned service area of the public utility,

the municipality or the public utility may petition the commission to change, upon the termination of the lease agreement, the assigned service area of the public utility to restore to the municipally owned utility the exclusive right to furnish retail electric service to the electric customers that are the subject of the lease agreement. The petition must include a map showing the boundaries of the area served by the municipally owned utility immediately before the execution of the lease agreement. Not more than ninety (90) days after receiving the petition, and following notice and hearing, the commission shall enter an order changing the assigned service area maps of the municipally owned utility and the public utility to reflect the new boundaries upon the termination of the lease agreement. Any compensation, including damages, for property or improvements that are located within the assigned service area established under this subdivision must be determined under the terms of the lease agreement between the municipally owned utility and the public utility.".

Page 290, between lines 6 and 7, begin a new paragraph and insert: "SECTION 270. IC 8-23-8-10 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2009 (RETROACTIVE)]: **Sec. 10. (a) As used in this section, "designated highway" refers to the highway designated as a limited access facility under subsection (b).**

- (b) The department shall designate and do all acts necessary to establish the part of State Road 331 in St. Joseph County from the U.S. Highway 20 bypass to State Road 23 as a limited access facility. The designated highway shall be in operation as a limited access facility beginning not later than January 1, 2009.
- (c) Neither the department nor any political subdivision may authorize any additional curb cuts or intersections after January 1, 2009, on the designated highway. The department shall limit intersections on the designated highway to the following locations:
 - (1) U.S. Highway 20 bypass.
- 35 (2) Dragoon Trail.

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- (3) Twelfth Street (also known as Harrison Road).
- 37 (4) Indiana 933 (also known as Lincoln Way).
- 38 (5) Jefferson Boulevard.

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1	(6) McKinley Highway.
2	(7) Day Road.
3	(8) Cleveland Road.
4	(9) State Road 23.".
5	Page 293, between lines 17 and 18, begin a new paragraph and
6	insert:
7	"(g) The plan may not permit treatment limitations or financial
8	requirements on the coverage of chiropractor office services if
9	similar limitations or requirements are not imposed on the
10	coverage of physician office services.".
11	Page 302, between lines 11 and 12, begin a new paragraph and
12	insert:
13	"SECTION 300. IC 16-18-2-62 IS AMENDED TO READ AS
14	FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 62. (a) "Commission",
15	for purposes of IC 16-19-6, refers to the commission for special
16	institutions.
17	(b) (a) "Commission", for purposes of IC 16-31, refers to the
18	Indiana emergency medical services commission.
19	(c) (b) "Commission", for purposes of IC 16-46-11.1, has the
20	meaning set forth in IC 16-46-11.1-1.
21	SECTION 297. IC 16-42-19-11.5 IS ADDED TO THE INDIANA
22	CODE AS A NEW SECTION TO READ AS FOLLOWS
23	[EFFECTIVE JULY 1, 2009]: Sec. 11.5. Beginning July 1, 2010, on
24	the request of a patient who is blind (as defined in IC 12-7-2-21(2))
25	or visually impaired (as defined in IC 12-7-2-198(a)), a pharmacist
26	shall dispense a prescription for a legend drug with a label that:
27	(1) complies with the requirements under section 11(a)(1) of
28	this chapter; and
29	(2) contains the label information on:
30	(A) a braille label that is affixed to the immediate container
31	in which the drug is delivered; or
32	(B) a recorded audio device or an electronic tagging device
33	that is permanently attached to the immediate container in
34	which the drug is delivered.
35	SECTION 303. IC 20-18-2-2.7 IS ADDED TO THE INDIANA
36	CODE AS A NEW SECTION TO READ AS FOLLOWS
37	[EFFECTIVE JULY 1,2009]: Sec. 2.7. "Children's home" means the
38	Indiana Soldiers' and Sailors' Children's Home established by

1	IC 20-22.5-2-5.".
2	Page 305, between lines 12 and 13, begin a new paragraph and
3	insert:
4	"SECTION 305. IC 20-22.5 IS ADDED TO THE INDIANA CODE
5	AS A NEW ARTICLE TO READ AS FOLLOWS [EFFECTIVE JULY
6	1, 2009]:
7	ARTICLE 22.5. INDIANA SOLDIERS' AND SAILORS'
8	CHILDREN'S HOME
9	Chapter 1. Administration
0	Sec. 1. The department shall do the following:
1	(1) Administer the children's home.
2	(2) Recommend to the governor legislation that is needed to
3	implement the policies developed by the state superintendent
4	(3) Review, revise, adopt, and submit to the budget agency
5	budget proposals for the children's home.
6	(4) Employ the personnel necessary to perform the duties
.7	imposed upon the state superintendent by this chapter.
.8	(5) Do any and all acts necessary, proper, or convenient to
9	carry out this chapter.
20	Sec. 2. (a) Except as provided in subsection (b), the department
21	has complete policy and administrative control and responsibility
22	for the children's home.
23	(b) Notwithstanding any other statute or policy, the department
24	or the superintendent of the children's home may not terminate, in
2.5	whole or in part, services provided by the children's home to
26	Indiana children or terminate other operations that exist at the
27	children's home unless specifically authorized by a statute enacted
28	by the general assembly. The department or the superintendent of
29	the children's home shall maintain adequate staffing levels to
0	provide the necessary services to the children residing at the
31	children's home.
32	Sec. 3. (a) The children's home is under the administrative
33	control of a superintendent who has the powers, duties, and
34	qualifications provided by law or as may be otherwise prescribed
35	or delegated by the state superintendent (including the authority
6	to execute contracts) insofar as the powers, duties, and
37	qualifications are not in conflict with this chapter.

 $(b) \, The \, superintendent \, of \, the \, children's \, home \, shall \, be \, appointed$

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by the state superintendent. The superintendent of the children's home may be removed only by the state superintendent. The superintendent of the children's home is administratively responsible to the state superintendent.

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- (c) Except as provided in subsection (d), the superintendent of the children's home must meet all the following conditions:
 - (1) Be a teacher licensed by the state or have at least a baccalaureate degree from an accredited college or university in a field related to education or child growth and development.
 - (2) Have experience working with children.
 - (3) At the time of appointment, be a resident and citizen of Indiana.
 - (4) Have other qualifications as required by the state superintendent.
- (d) When at least two (2) candidates meet the conditions listed in subsection (c), the state superintendent shall give preference to individuals who have been honorably discharged after service in the armed forces of the United States (as defined in IC 20-22.5-2-1) in appointing a candidate to the position of superintendent of the children's home.
- Sec. 4. The superintendent of the children's home is entitled to receive a salary in an amount to be fixed by the state superintendent subject to the approval of the budget agency.
- Sec. 5. (a) The superintendent of the children's home shall furnish an individual public bond in an amount determined by the department, payable to the state, and conditioned upon the faithful performance of the superintendent of the children's home's duties.
- (b) A bond required under this section is subject to the approval of the insurance commissioner and shall be filed in the office of the secretary of state.
- Sec. 6. The superintendent of the children's home, subject to the approval of the state superintendent:
 - (1) has charge and management of the children's home;
 - (2) shall direct the care, education, and maintenance of the children of the children's home; and
 - (3) is the chief appointing authority for all employees necessary to properly conduct and operate the children's

1	home.
2	Sec. 7. (a) The state superintendent shall annually review the
3	salary schedules of the school corporation with the greatest current
4	ADM (as defined in IC 20-43-1-10) in the county in which the
5	children's home is located to determine the salary schedule of that
6	school corporation.
7	(b) The state superintendent shall, following the annual review
8	required by subsection (a), prescribe, subject to approval by the
9	state personnel department and the budget agency, a salary
10	schedule for the children's home, using a daily rate of pay for each
11	teacher that is commensurate with the salary schedules of the
12	school corporation that has the greatest current ADM (as defined
13	in IC 20-43-1-10) in the county in which the children's home is
14	located.
15	(c) The state superintendent shall prescribe the terms of the
16	annual contract awarded to licensed teachers qualifying for
17	payment under this schedule.
18	(d) The department shall advise the budget agency and the
19	governor of the department's action under this section. Hours of
20	work for all teachers shall be set in accordance with IC 4-15-2.
21	Sec. 8. IC 4-13-2 applies to the children's home.
22	Chapter 2. Indiana Soldiers' and Sailors' Children's Home
23	Sec. 1. As used in this chapter, "armed forces of the United
24	States" means the forces and components of the following:
25	(1) The United States Army.
26	(2) The United States Navy.
27	(3) The United States Marine Corps.
28	(4) The United States Air Force.
29	(5) The United States Coast Guard.
30	Sec. 2. As used in this chapter, the "county of residence of the
31	child":
32	(1) is the county of residence of the responsible parent; or
33	(2) if there is no responsible parent, is the county within which
34	the child's guardianship or wardship is established by
35	appointment of the court.
36	Sec. 3. As used in this chapter, "member of the armed forces"
37	means the following:

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(1) An individual who is on active duty in the armed forces of

1 the United States or National Guard.

2 (2) An individual who previously has served on active duty in 3 the armed forces of the United States or National Guard and 4 has received an honorable or general discharge

Sec. 4. As used in this chapter, "National Guard" means:

- 4 has received an honorable or general discharge.
 - (1) the Indiana Army National Guard; or
 - (2) the Indiana Air National Guard.
 - Sec. 5. The Indiana Soldiers' and Sailors' Children's Home is established as a state residential school and home for the care of Indiana children who are in need of residential care and would qualify for educational service. Preference shall be given to the admission of children of members of the armed forces and children of families of veterans who meet these admission criteria. A child who requires residential placement in a secure facility (as defined in IC 31-9-2-114), a juvenile detention facility, or a detention center for the safety of the child or others may not be placed at the children's home.
 - Sec. 6. (a) The children of the children's home shall be:
 - (1) taught and treated in a manner that promotes the children's physical, intellectual, and moral improvement; and
 - (2) trained in habits of industry, studiousness, and morality.
 - (b) The superintendent of the children's home shall afford to the children of the children's home literary, art, technical, and industrial education as can reasonably be provided.
 - Sec. 7. (a) The children's home must be accredited as a public school. The superintendent of the children's home may arrange in a special situation, as provided by the department, for the education of a child in a school in a county school corporation reorganized under IC 20-23 near the home.
 - (b) A person who teaches at the children's home must be qualified and properly licensed by the state board.
 - Sec. 8. (a) The superintendent of the children's home shall establish and maintain a vocational school on the grounds of the home and maintain suitable facilities in which vocational trades and arts are taught.
 - (b) The superintendent of the children's home may enter into contracts with other school corporations or entities for the use of the vocational school.

1	(c) The superintendent may use donated money or state money
2	without limitation to finance vocational construction projects that
3	are:
4	(1) authorized by the budget agency; and
5	(2) in accordance with designs approved by the public works
6	division of the Indiana department of administration.
7	Sec. 9. The superintendent of the children's home shall:
8	(1) provide the Indiana National Guard Youth Challenge
9	Academy with access to all facilities and space necessary to
0	carry out the purpose of the Indiana National Guard Youth
1	Challenge Academy; and
2	(2) enter into an agreement with the Indiana National Guard
.3	to allocate costs associated with the use of facilities or services
4	used by both the Indiana National Guard and the children's
5	home.
6	Sec. 10. The superintendent of the children's home, with
7	approval of the state superintendent, may enter into contracts or
8	agreements with other state agencies, school corporations, or other
9	entities to use the:
20	(1) facilities or services of the children's home; and
21	(2) children's home for summer camps, seminars, programs,
22	or other educational events.
23	Sec. 11. (a) After an adequate investigation as determined by the
24	superintendent of the children's home or the designee of the
2.5	superintendent of the children's home, including consideration of
26	appropriateness of placement, the superintendent of the children's
27	home shall receive as a resident in the children's home a child if the
28	child meets the requirements under subsection (b).
29	(b) Before a child may be received as a resident in the children's
0	home under subsection (a), the child must meet the following
31	requirements:
32	(1) The parent or parents of the child are Indiana residents
33	immediately before application or the child is physically
4	present in Indiana immediately before application.
55	(2) The child is at least three (3) years of age but less than
66	eighteen (18) years of age.
37	(3) The child is in need of residential care and education.

(c) If the applications of all children of members of the armed

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forces have been considered and space is available, the
superintendent of the children's home may, if a child meets the
requirements under subsection (b), receive as residents in the
children's home the:
(1) grandchildren;
(2) stepchildren;
(3) brothers;
(4) sisters;
(5) nephews; and
(6) nieces;
of members of the armed forces who are in need of residential care
and education.
(d) If the applications of all children eligible for residence under
subsections (a) through (c) have been considered and if space is
available, the superintendent of the children's home may accept for
residence children referred:
(1) by the department of child services established by
IC 31-25-1-1; or
(2) by the division of special education established by
IC 20-35-2-1;
subject to an adequate investigation as determined by the
superintendent of the children's home or the designee of the
superintendent of the children's home, including a consideration of
appropriateness of placement.
Sec. 12. (a) An application for admission to the children's home
may be made by a responsible parent, a guardian, a representative
of the court, or the department of child services.
(b) If an application is submitted by a person other than a
responsible parent or guardian, the superintendent of the
children's home shall cooperate with the department of child
services to ensure that an appropriate case study is made upon
application and continued throughout the period the child resides
at the children's home.
Sec. 13. (a) The superintendent of the children's home is
responsible for the care, control, and training of children admitted
to and living in the home from the day a child is admitted to the

home until the child is:

(1) eighteen (18) years of age; or

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1	(2) discharged from the home.
2	(b) The superintendent of the children's home shall make
3	certain in the case of every child in the home that:
4	(1) there is a responsible parent;
5	(2) there is a responsible relative; or
6	(3) if a responsible parent or relative is not available, the child
7	is a ward of the department of child services from which there
8	is a representative;
9	who is regularly and frequently concerned with the welfare of the
10	child.
11	(c) If:
12	(1) the parent or parents have been deprived by order of the
13	court of the custody and control of a child admitted to the
14	children's home; and
15	(2) custody has been given by the court to the department o
16	child services;
17	the wardship shall be retained by the department of child services
18	Sec. 14. (a) Either parent, a guardian, a relative, or the
19	department of child services applying for the admission of a child
20	to the children's home shall, in securing admittance of the child
21	place the child in the children's home for the length of time
22	determined to be in the best interests of the child.
23	(b) A child shall be returned at any time to the:
24	(1) parent or parents;
25	(2) guardian;
26	(3) relative; or
27	(4) department of child services that placed the child in the
28	children's home;
29	if removal of the child from the children's home is applied for upon
30	written application. The superintendent of the children's home
31	may require not more than thirty (30) days notice when a
32	discharge is requested.
33	(c) If the superintendent of the children's home finds that a child
34	does not adjust to institutional living or is not educable, the
35	superintendent of the children's home:
36	(1) may:
37	(A) with the approval of the state superintendent; and
38	(B) upon proper notification;

discharge the child to the applicant placing the child in the children's home; and

- (2) shall cooperate with the department of child services for further disposition of the case as necessary.
- Sec. 15. A child admitted to the children's home may not be permanently removed from the children's home and placed elsewhere without the express approval of the:
 - (1) parent or parents who;
- (2) guardian who;

- (3) relative who; or
- (4) department of child services that;
- 12 applied for admission of the child to the children's home.
 - Sec. 16. Either parent, a guardian, a relative, a representative of the department of child services, or other person approved by the superintendent of the children's home may visit a child admitted to the children's home at times or places the superintendent of the children's home prescribes.
 - Sec. 17. (a) Each child, the estate of the child, the parent or parents of the child, or the guardian of the child, individually or collectively, are liable for the payment of the costs of maintenance of the child of up to one hundred percent (100%) of the per capita cost, except as otherwise provided. The cost shall be computed annually by dividing the total annual cost of operation for the fiscal year, exclusive of the cost of education programs, construction, and equipment, by three hundred sixty-five (365). The maintenance cost shall be referred to as maintenance charges. The charge may not be levied against any of the following:
 - (1) A county or any person or office, to be derived from county tax sources.
 - (2) A child orphaned by reason of the death of the natural parents.
 - (b) The billing and collection of the maintenance charges as provided for in subsection (a) shall be made by the superintendent of the children's home based on the per capita cost for the preceding fiscal year. All money collected shall be deposited in a fund to be known as the Indiana soldiers' and sailors' children's home maintenance fund. The fund shall be used by the state superintendent for the:

(1) preventative maintenance; and

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- (2) repair and rehabilitation; of buildings of the children's home that are used for housing, food service, or education of the children of the children's home.
- (c) The superintendent of the children's home may, with the approval of the state superintendent, agree to accept payment at a lesser rate than that prescribed in subsection (a). The superintendent of the children's home shall, in determining whether or not to accept the lesser amount, take into consideration the amount of money that is necessary to maintain or support any member of the family of the child. All agreements to accept a lesser amount are subject to cancellation or modification at any time by the superintendent of the children's home with the approval of the state superintendent.
- (d) A person who has been issued a statement of amounts due as maintenance charges may petition the superintendent of the children's home for a release from or modification of the statement and the superintendent of the children's home shall provide for hearings to be held on the petition. The superintendent of the children's home may, with the approval of the state superintendent and after the hearing, cancel or modify the former statement and at any time for due cause may increase the amounts due for maintenance charges to an amount not to exceed the maximum cost as determined under subsection (a).
- (e) The superintendent of the children's home may arrange for the establishment of a graduation or discharge trust account for a child by arranging to accept a lesser rate of maintenance charge. The trust fund must be of sufficient size to provide for immediate expenses upon graduation or discharge.
- (f) The superintendent of the children's home may make agreements with instrumentalities of the federal government for application of any monetary awards to be applied toward the maintenance charges in a manner that provides a sufficient amount of the periodic award to be deposited in the child's trust account to meet the immediate personal needs of the child and to provide a suitable graduation or discharge allowance. The amount applied toward the settlement of maintenance charges may not exceed the amount specified in subsection (a).

1	(g) The superintendent of the children's home may do the
2	following:
3	(1) Investigate, either with the superintendent of the
4	children's home's own staff or on a contractual or other basis,
5	the financial condition of each person liable under this
6	chapter.
7	(2) Make determinations of the ability of:
8	(A) the estate of the child;
9	(B) the legal guardian of the child; or
10	(C) each of the responsible parents of the child;
11	to pay maintenance charges.
12	(3) Set a standard as a basis of judgment of ability to pay that
13	shall be recomputed periodically to do the following:
14	(A) Reflect changes in the cost of living and other pertinent
15	factors.
16	(B) Provide for unusual and exceptional circumstances in
17	the application of the standard.
18	(4) Issue to any person liable under this chapter statements of
19	amounts due as maintenance charges, requiring the person to
20	pay monthly, quarterly, or otherwise as may be arranged, an
21	amount not exceeding the maximum cost as determined under
22	this chapter.
23	Sec. 18. (a) In the case of a child who is:
24	(1) adjudicated to be a delinquent child or child in need of
25	services by a juvenile court; and
26	(2) placed by or with the consent of the department of child
27	services in the children's home;
28	the department of child services shall reimburse the cost of services
29	provided to the child, including related transportation costs, and
30	any cost incurred by a county where the children's home is located
31	to transport or detain the child before the child is adjudicated to be
32	a delinquent child or child in need of services.
33	(b) The department of child services shall reimburse and pay
34	costs under this section.
35	(c) The department of child services may require the parent or
36	guardian of the child, other than a parent, guardian, or custodian
37	associated with the children's home, to reimburse the department

for an amount paid under this section.

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(d) A child who is admitted to the children's home does not become a resident of the county where the children's home is located.

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- (e) When an unemancipated child is released from the children's home, the department of child services is responsible for transporting the child to the parent or guardian of the child. If a parent or guardian does not exist for an unemancipated child released from the home, the department of child services shall obtain custody of the child.
- Sec. 19. (a) The attorney general shall, upon notification by the superintendent of the children's home through the state superintendent, bring suit in the name of the state of Indiana on behalf of the superintendent of the children's home against the estate of a person failing to make payments as required in this chapter.
- (b) If a judgment is obtained under this section, the judgment constitutes a lien against that part of the estate of a person as described in the complaint.
- (c) The attorney general may bring suit against the parent, parents, or legal guardian of a child for failure to comply with the maintenance agreement or for failure to make an agreement. Suit may be brought for the amount due the state for the maintenance charges of the child. The court may order the payment of amounts due for maintenance charges for a time as the circumstances require. The order may be entered against any or all of the defendants and may be based upon the proportionate ability of each defendant to contribute to the payment of amounts representing maintenance charges. Orders for the payment of money may be enforced by attachment as in contempt proceedings against the persons of the defendants, and in addition as other judgments at law, and costs may be adjudged against and apportioned among the defendants.
- Sec. 20. (a) The superintendent of the children's home shall do the following:
- (1) Cause the grounds of the home to be:
- 36 (A) kept in proper order; and
- **(B)** ornamented with trees, shrubs, and flowers.
- 38 (2) Provide and maintain conservatories or greenhouses.

1	(b) The superintendent of the children's home:
2	(1) may have any suitable land connected with the home
3	cultivated for the use and benefit of the children's home; and
4	(2) shall have the children in the children's home assist in the
5	work.
6	Sec. 21. The superintendent of the children's home shall have
7	the children in the children's home assist in the following:
8	(1) Housekeeping services of the children's home.
9	(2) Manufacture and repair of the clothing of children.
10	(3) The provision of services necessary for the children's
11	home.
12	Sec. 22. In prescribing labor, service, and study for the children
13	of the children's home, the superintendent of the children's home
14	shall consider the proper education and training of the children.
15	Sec. 23. The superintendent of the children's home may, subject
16	to IC 4-24-3-2, receive for the use of the home:
17	(1) gifts;
18	(2) legacies;
19	(3) devises; and
20	(4) conveyances of real and personal property;
21	that are made, given, or granted to or for the children's home or in
22	the name of the children's home.
23	Sec. 24. (a) Notwithstanding IC 22-2-5-2, the children's home
24	and:
25	(1) an employee if there is no representative described under
26	subdivision (2) or (3) for that employee;
27	(2) the exclusive representative of its certificated employees
28	with respect to those employees; or
29	(3) a labor organization representing its noncertificated
30	employees with respect to those employees;
31	may agree in writing to a wage payment arrangement.
32	(b) A wage payment arrangement under subsection (a) may
33	provide that compensation earned during a school year may be
34	paid:
35	(1) using equal installments or any other method; and
36	(2) over:
37	(A) all or part of that school year; or
20	(P) any other period that begins not earlier than the first

day of that school year and ends not later than thirteen
(13) months after the wage payment arrangement period
begins.
An arrangement may provide that compensation earned in a
calendar year is paid in the next calendar year, so long as all the
compensation is paid within the thirteen (13) month period
beginning with the first day of the school year.
(c) A wage payment arrangement under subsection (a) must be
structured in a manner that is not considered:
(1) a nonqualified deferred compensation plan for purposes of
Section 409A of the Internal Revenue Code; or
(2) deferred compensation for purposes of Section 457(f) of
the Internal Revenue Code.
(d) Absent an agreement under subsection (a), the children's
home remains subject to IC 22-2-5-1.
(e) Wage payments required under a wage payment
arrangement entered into under subsection (a) are enforceable
under IC 22-2-5-2.
(f) If an employee leaves employment for any reason, either
permanently or temporarily, the amount due the employee under
IC 22-2-5-1 and IC 22-2-9-2 is the total amount of the wages earned
and unpaid.
(g) Employment with the home may not be conditioned upon the
acceptance of a wage payment arrangement under subsection (a).
(h) An employee may revoke a wage payment arrangement
under subsection (a) at the beginning of each school year.
SECTION 306. IC 20-33-2-9, AS AMENDED BY P.L.185-2006,
SECTION 12, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
JULY 1, 2009]: Sec. 9. (a) The governing body of each school
corporation shall designate the appropriate employees of the school
corporation to conduct the exit interviews for students described in
section 6(a)(3) 6(3) of this chapter. Each exit interview must be
personally attended by:
(1) the student's parent;
(2) the student;
(3) each designated appropriate school employee; and
(4) the student's principal.

1 eighteen (18) years of age is bound by the requirements of compulsory 2 school attendance and may not withdraw from school before graduation 3 unless: 4 (1) the student, the student's parent, and the principal agree to the 5 withdrawal: (2) at the exit interview, the student provides written 6 7 acknowledgment of the withdrawal that meets the requirements 8 of subsection (c) and the: 9 (A) student's parent; and 10 (B) school principal; 11 each provide written consent for the student to withdraw from school; and 12 13 (3) the withdrawal is due to: (A) financial hardship and the individual must be employed to 14 15 support the individual's family or a dependent; 16 (B) illness; or 17 (C) an order by a court that has jurisdiction over the student. 18 (c) A written acknowledgment of withdrawal under subsection (b) 19 must include a statement that the student and the student's parent 20 understand that withdrawing from school is likely to: 21 (1) reduce the student's future earnings; and 2.2. (2) increase the student's likelihood of being unemployed in the 23 future. (d) At an exit interview, the employee designated by the school 24 25 corporation under subsection (a) to conduct the exit interview shall provide to the student's parent a copy of the written form 26 27 developed under subsection (e) describing services offered at the 28 children's home established by IC 20-22.5-2-5 and the Indiana 29 National Guard Youth Challenge Academy. The student's parent 30 shall provide written acknowledgment that the parent received a 31 copy of the form.

consultation with the superintendent of the children's home and the Indiana National Guard, shall develop a form describing the services provided by the children's home and the Indiana National Guard Youth Challenge Academy. The department shall provide each school corporation with a sufficient number of copies of the form developed under this subsection.

(e) For purposes of subsection (d), the department, in

38 form developed under this subsection.

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SECTION 307. IC 20-33-8-19.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 19.5. (a) In addition to the notice of the right to appear at an expulsion meeting provided under section 19(b) of this chapter, the superintendent shall provide to a student's parent a copy of the written form described in subsection (b) informing the student's parent of services provided by the children's home established by IC 20-22.5-2-5 and the Indiana National Guard Youth Challenge Academy.

(b) For purposes of subsection (a), the department, in consultation with the superintendent of the children's home and the Indiana National Guard, shall develop a form describing the services provided by the children's home and the Indiana National Guard Youth Challenge Academy. The department shall provide each school corporation with a sufficient number of copies of the form developed under this subsection."

Page 306, line 26, after "(a)" insert "This section applies to a school corporation for which the quotient determined under STEP FOUR of the following formula is at least ten percent (10%):

STEP ONE: Determine the total number of charters that have been granted for operation within the corporate boundaries of the school corporation.

STEP TWO: Determine the total number of school buildings in which student instruction is provided and operated by the school corporation within the corporate boundaries of the school corporation.

STEP THREE: Add the number determined under STEP ONE and the number determined under STEP TWO.

STEP FOUR: Determine a percentage by dividing:

- (A) the number determined under STEP ONE; by
- **(B)** the sum determined under STEP THREE.

(b)".

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Page 306, line 27, delete "not more than one (1) additional" and insert "in a school corporation to which this section applies, a".

Page 306, line 28, delete "in a particular calendar year." and insert "only with the approval of the governing body of the school corporation.".

Page 306, delete line 29.

Page 320, line 28, after "of" insert "adjusted assessed valuation (as determined under IC 6-1.1-34-8) per student in ADM.".

Page 323, between lines 31 and 32, begin a new paragraph and insert:

"SECTION 351. IC 27-1-3.1-14 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 14. (a) Upon the adoption of an examination report under section 11(a)(1) of this chapter, the commissioner shall continue to hold the content of the examination report as confidential information for a period of thirty (30) days except to the extent provided in section 10(b) of this chapter. Thereafter, the report shall be open for public inspection.

- (b) This chapter does not prevent or prohibit the commissioner from disclosing the content of an examination report, preliminary examination report, or results, or any matter relating thereto, to **the National Association of Insurance Commissioners**, the insurance department of any other state or country, or to law enforcement officials of Indiana or any other state or agency of the federal government at any time, if the agency or office receiving the report or matters relating thereto agrees in writing to hold it confidential and in a manner consistent with this chapter.
- (c) If the commissioner determines that regulatory action is appropriate as a result of any examination, the commissioner may initiate any proceedings or actions authorized by law.
- (d) This chapter does not limit the commissioner's authority to use and, if appropriate, to make public any final or preliminary examination report, any examiner or company workpapers or other documents, or any other information discovered or developed during the course of any examination in the furtherance of any legal or regulatory action that the commissioner may, in the commissioner's sole discretion, consider appropriate.

SECTION 352. IC 27-1-3.1-15 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 15. All working papers, recorded information, documents, and copies thereof produced by, obtained by, or disclosed to the commissioner or any other person in the course of an examination under this chapter (including trade secrets and information obtained from a federal agency, a foreign country, the National Association of Insurance Commissioners, or under another state law) are confidential for the purposes of

IC 5-14-3-4, are not subject to subpoena, and may not be made public by the commissioner or any other person, except to the extent provided in section 14 of this chapter. However, access may also be granted to the National Association of Insurance Commissioners. Those parties must agree in writing prior to receiving the information to provide to it the same confidential treatment as required by this section, unless the prior written consent of the company to which it pertains has been obtained.

SECTION 353. IC 27-1-3.5-0.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1,2009]: **Sec. 0.5. The commissioner may adopt rules under IC 4-22-2 to implement this chapter.**

SECTION 354. IC 27-1-3.5-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 1. As used in this chapter, "commissioner" refers to the insurance commissioner appointed under IC 27-1-1-2. "accountant" means an independent certified public accountant or accounting firm that is:

- (1) in good standing with the American Institute of Certified Public Accountants and in all states in which the accountant is licensed to practice;
- (2) Canadian chartered if the insurer is a Canadian insurer; or
- (3) British chartered if the insurer is a British insurer.

SECTION 355. IC 27-1-3.5-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 4. (a) As used in this chapter, "work papers" means the records kept by the independent auditor an accountant of the procedures followed, the tests performed, the information obtained, and the conclusions reached by the independent auditor's related to the accountant's audit of the financial statements of a domestic an insurer.

- (b) The term includes any audit planning documentation, work programs, analyses, memoranda, letters of confirmation and representation, abstracts of company documents, and schedules or commentaries that:
 - (1) are prepared or obtained by the independent auditor accountant in the course of any the accountant's audit of the financial statements of a domestic an insurer; and
- (2) support the independent auditor's accountant's opinion. on

1 the domestic insurer's financial statements. 2 SECTION 356. IC 27-1-3.5-5 IS AMENDED TO READ AS 3 FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 5. (a) Except as 4 provided in subsections (b) and (c), this chapter applies to all domestic 5 insurers. (b) A domestic An insurer that has: (1) direct written premiums of less than one million dollars 7 8 (\$1,000,000) in any calendar year; and 9 (2) less than one thousand (1,000) policyholders or certificate 10 holders of directly direct written policies nationwide at the end 11 of a calendar year; and 12 (3) assumed premiums under contracts or treaties of 13 reinsurance of less than one million dollars (\$1,000,000) in a 14 calendar vear; 15 is exempt from this chapter with respect to that year. However, the 16 commissioner may require compliance with this chapter upon a finding 17 that compliance with this chapter is necessary for the commissioner to 18 carry out a statutory responsibility. 19 (c) A foreign or an alien insurer that files an audited financial report 20 in another state or country pursuant to that under the other state's or 21 country's requirement for filing of annual audited financial reports is 22 exempt from sections 6 through 13 of this chapter with respect to the 23 year of that the annual audited financial report, from the requirement 24 to file an audited financial report with the commissioner under this chapter, if: 25 26 (1) the commissioner has found the other state's or country's requirement for filing of audited financial reports to be 27 substantially similar to the requirements of this chapter; 28 29 (2) copies a copy of the audited financial report, the report on 30 significant deficiencies in communication of internal controls, 31 control related matters noted in an audit, and the accountant's 32 letter of qualifications filed with the other state or country are 33 filed with the commissioner in accordance with the filing dates set 34 forth in sections 8, 6 12, and 12.5 of this chapter; and 35 (3) a copy of a notification of an adverse financial condition 36 report that is filed with the other state is filed with the

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commissioner within the time specified in section 11 of this

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chapter.

(d) A foreign or an alien insurer that files a report of internal control over financial reporting in another state is exempt from filing the same report under this chapter if:

- (1) the other state has reporting requirements substantially similar to this chapter; and
- (2) the report is filed with the commissioner of insurance of the other state in a timely manner.

This (e) Subsection (c) or (d) does not prevent the commissioner from ordering, conducting, or performing examinations of foreign or alien insurers under the rules, regulations, and practices of the department under IC 27-1-3.1.

SECTION 357. IC 27-1-3.5-6 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 6. (a) A domestic An insurer shall have an audit by an independent auditor every year accountant and shall file an audited financial report with the commissioner every year before not later than June 1 immediately following the December 31 that ends the year reported on in the financial report. The commissioner may require a domestic an insurer to file an audited financial report earlier than June 1 if the commissioner gives the domestic insurer ninety (90) days advance notice of the earlier filing date.

- (b) An extension of the June 1 filing date may be granted by the commissioner for thirty (30) days upon a showing by the insurer and its independent auditor the insurer's accountant of the reasons for requesting the extension and a determination by the commissioner that there is good cause for an extension. The request for an extension must be submitted in writing at least ten (10) days before the due date and must include sufficient detail to permit the commissioner to make an informed decision with respect to the requested extension.
- (c) If an extension is granted under subsection (b), a similar extension of thirty (30) days is granted for the filing of the insurer's management report of internal control over financial reporting.

SECTION 358. IC 27-1-3.5-7 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 7. (a) The annual audited financial report filed by a domestic an insurer under this chapter shall report:

(1) the financial position of the domestic insurer as of the end of the most recently ended calendar year; and

1	(2) the results of the domestic insurer's operations, cash flow, and
2	changes in capital and surplus for that year;
3	in conformity with statutory accounting practices prescribed, or
4	otherwise permitted, by the department of insurance of the insurer's
5	state of domicile.
6	(b) The financial statements included in the annual audited financial
7	report filed by a domestic insurer under this chapter shall be examined
8	by an independent auditor. The independent auditor shall conduct its
9	examination of the domestic insurer's financial statements in
10	accordance with generally accepted auditing standards, and shall
11	consider such other procedures illustrated in the Financial Condition
12	Examiner's Handbook published by the National Association of
13	Insurance Commissioners as the independent auditor considers
14	necessary.
15	(c) (b) An annual audited financial report filed by a domestic an
16	insurer under this chapter must include the following:
17	(1) The report of the insurer's independent auditor. accountant.
18	(2) A balance sheet reporting admitted assets, liabilities, capital,
19	and surplus.
20	(3) A statement of operations.
21	(4) A statement of cash flow.
22	(5) A statement of changes in capital and surplus.
23	(6) Notes to financial statements. The notes must:
24	(A) be those required by the National Association of Insurance
25	Commissioners' annual statement instructions and any other
26	notes required by statutory accounting practices, which must
27	the National Association of Insurance Commissioners'
28	accounting practices and procedures manual; and
29	(B) include the following:
30	(A) a reconciliation of differences, if any, between the audited
31	statutory financial statements included in the audited
32	financial report and the annual financial statement filed by the
33	insurer under IC 27-1-20-21, including a written description of
34	the nature of these differences.
35	(B) A summary of the ownership and relationships of the
36	domestic insurer and all affiliated companies.
37	(d) (c) The financial statements included in a domestic an insurer's
3.8	audited financial report shall be prepared in the same form, and using

language and groupings substantially the same, as the relevant sections of the annual statement of the insurer filed with the commissioner under IC 27-1-20-21.

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(e) (d) The financial statements included in a domestic an insurer's audited financial report must be comparative, presenting the amounts as of December 31 of the year of the report and comparative amounts as of the immediately preceding December 31. However, in the first year in which an insurer is required to file an audited financial report under this chapter, the comparative data may be omitted.

SECTION 359. IC 27-1-3.5-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 8. (a) A domestic An insurer that is required by this chapter to file an annual audited financial reports report shall, not more than sixty (60) days after becoming subject to the requirement, register in writing with the commissioner the name and address of the independent auditor accountant retained by the insurer to conduct the annual audits audit required by this chapter. The domestic insurer shall continuously ensure that the information provided to the commissioner under this section is accurate, and shall inform the commissioner in writing of any change in the identity or address of its independent auditor. An insurer that does not have an accountant on retainer on July 1, 2009, shall register the name and address of the insurer's retained accountant at least six (6) months before the first date by which the insurer's first annual audited financial report is to be filed after June 30, 2009.

- (b) A domestic An insurer shall obtain a letter from its independent auditor the insurer's accountant that:
 - (1) states that the independent auditor accountant is aware of the provisions of IC 27 and the administrative rules of the department of insurance of the insurer's state of domicile that relate to auditing, accounting and financial matters; and
 - (2) affirms that the independent auditor accountant will express its the accountant's opinion on the financial statements of the domestic insurer in the terms of their conformity to the statutory accounting practices prescribed or otherwise permitted by the department, specifying such exceptions as the independent auditor accountant may believe appropriate.

38 The domestic insurer shall file a copy of this letter with the

commissioner.

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(c) If an independent auditor accountant that served as the accountant for the immediately preceding audited the most recent financial report filed by the insurer with the commissioner under this chapter is subsequently ceases to be terminated by the insurer or resigns as the independent auditor accountant for the insurer, the insurer shall:

- (1) not more than five (5) business days after the cessation of the independent auditor's services, termination or resignation, notify the commissioner in writing of the identity and address of the new independent auditor; termination or resignation;
- (2) not more than ten (10) business days after the notification given in under subdivision (1), furnish the commissioner with a separate letter that states whether in the twenty-four (24) months preceding the engagement of the new independent auditor termination or resignation there were any disagreements between the insurer and its the former independent auditor accountant on any matter of accounting principles or practices, financial statement disclosure, or auditing scope or procedure, which, if not resolved to the satisfaction of the former independent auditor accountant, would have caused the former independent auditor accountant to make reference to the subject matter of the disagreement in connection with the former independent auditor's statement of its accountant's opinion. on the insurer's financial report, and, if there was such a disagreement, provides a description of the disagreement. Disagreements required to be reported under this subdivision include those at the decision making level that were resolved:
 - (A) to the former accountant's satisfaction; and
 - (B) not to the former accountant's satisfaction; and
- (3) comply with subsection (d).

For the purposes of this subsection, "decision making level" refers to the personnel of the insurer who are responsible for the presentation of the insurer's financial statements and the personnel of the independent auditor accountant who are responsible for rendering the opinion of the auditor on the insurer's audited financial report.

37 (d) A domestic An insurer subject to the provisions of subsection (c)38 shall:

provide its former independent auditor accountant with a copy of the letter furnished to the commissioner under subsection (c)(2); and

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(2) request in writing its former independent auditor accountant to furnish a letter addressed to the insurer stating whether the former independent auditor accountant agrees with the statements contained in the letter furnished to the commissioner under subsection (c)(2) and, if not, stating the reasons for the former independent auditor's accountant's disagreement.

The domestic insurer shall furnish the commissioner with a copy of any responsive letter it the insurer receives from its the insurer's former independent auditor within five (5) business days after the insurer receives the accountant together with the insurer's own letter.

SECTION 360. IC 27-1-3.5-10 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 10. A domestic An insurer may apply in writing to the commissioner for approval to satisfy the requirements of this chapter by filing file audited consolidated or combined financial statements instead of separate annual audited financial statements if the insurer is part of a group of insurance companies that utilizes a pooling or one hundred percent (100%) reinsurance agreement that affects the solvency and integrity of the insurer's reserves and the insurer cedes all of the insurer's direct and assumed business to the pool. If a domestic an insurer whose application is approved elects to file a consolidated return, the insurer shall file, with its financial statements, a columnar consolidating or combining schedule, worksheet, which must meet the following requirements:

- (1) Amounts shown on the consolidated or combined **annual** audited financial report shall be shown on the schedule. **worksheet.**
- (2) Amounts for each insurer subject to this section shall be stated separately.
- (3) Noninsurance operations shall may be shown on the schedule worksheet on a combined or an individual basis.
- (4) Explanations of consolidating and eliminating entries shall be included.
- (5) A reconciliation shall be included of any differences between the amounts shown in the individual insurer columns of the

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schedule worksheet and comparable amounts shown on the annual statements of the insurers.

SECTION 361. IC 27-1-3.5-11 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 11. (a) A domestic An insurer required to file an annual audited financial reports report under this chapter shall require its independent auditor the accountant to report in writing to the board of directors or the board of director's audit committee, not more than five (5) business days after making a the determination, the independent auditor's accountant's determination that:

- (1) the domestic insurer has materially misstated to the commissioner the financial condition of the insurer as of the date of the balance sheet being examined audited by the independent auditor; accountant; or
- (2) the domestic insurer does not meet the minimum capital and surplus requirements of Indiana as of the date of the balance sheet being examined audited by the independent auditor: accountant.

The domestic insurer who that has received a report under this section shall forward a copy of the report to the commissioner within five (5) business days after receipt of the report and shall provide the independent accountant making the report with evidence of the report being furnished to the commissioner. An independent auditor who accountant that does not receive the evidence that the report was filed with the commissioner within the required five (5) business days shall furnish the commissioner a copy of the report within the next five (5) business days. An independent auditor may accountant is not be liable to any person for a statement made in connection with this subsection, if the statement is made in good faith compliance with this subsection.

(b) If the independent auditor accountant, of a domestic insurer, after the filing of the insurer's audited financial report under this chapter, becomes aware of facts that, if the independent auditor accountant had been aware of the facts when writing its the accountant's report, might have affected the independent auditor's accountant's report that was included in the insurer's annual audited financial report, the independent auditor accountant shall take such action as is prescribed in the Volume 1, Section AU 561 of the Professional Standards of the American Institute of Certified Public Accountants.

1 SECTION 362. IC 27-1-3.5-12.5 IS AMENDED TO READ AS 2 FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 12.5. The independent 3 auditor An accountant shall furnish the domestic insurer, in 4 connection with and for inclusion in the filing of the annual audited 5 financial report, a letter stating the following: 6 (1) That the independent auditor accountant is independent with 7 respect to the insurer and conforms to the standards of the 8 independent auditor's accountant's profession as contained in the Code of Professional Ethics and Pronouncements of the American 9 Institute of Certified Public Accountants and the rules of 10 professional conduct of the Indiana applicable state board of 11 12 accountancy. (2) The: 13 14 (A) general background and experience; and 15 (B) experience in audits of insurers; of the staff assigned to the audit. The letter must also state 16 17 whether each member of the staff is a certified public an 18 accountant. This subdivision does not prohibit the independent 19 auditor from using accountant's use of the staff as considered 2.0 appropriate where such use is consistent with the standards 2.1 prescribed by generally accepted auditing standards. 2.2. (3) That the independent auditor accountant understands that the: 23 (A) annual audited financial report and the accountant's 24 opinion on the annual audited financial report will be filed 25 with the commissioner; and 26 **(B) commissioner** will be relying on the independent auditor's 27 annual audited financial report and the independent auditor's 28 opinion in the report for filed report and opinion in the 29 monitoring and regulation of the financial positions position 30 of the insurers. insurer. 31 (4) That the independent auditor accountant consents to the 32 requirements of section 13 of this chapter and consents and 33 agrees to make available for review by the commissioner, the 34 commissioner's designee, or the commissioner's appointed agent, 35 any of the independent auditor's accountant's work papers. and 36 significant communications. 37 (5) That the independent auditor accountant is properly licensed 38 by an appropriate state licensing authority and is a member in

good standing in the American Institute of Certified Public Accountants.

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(6) That the independent auditor is in compliance with the requirements of section 9 of this chapter.

SECTION 363. IC 27-1-3.5-13 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 13. (a) A domestic An insurer required to file an audited financial report under this chapter shall require its independent auditor the accountant to make available for review by department examiners:

- (1) all work papers prepared in the conduct of the independent auditor's examination; accountant's audit; and
- (2) any record of significant communications, related to the audit, between the independent auditor accountant and the insurer; that took place at (A) the offices of the insurer, (B) the department, (C) the offices of the independent auditor; or (D) any other reasonable place designated by the commissioner.
- (b) The An insurer described in subsection (a) shall require the independent auditor accountant to retain the audit work papers and communications until the department has filed a report on the examination covering the period of the audit but not later than seven (7) years after the date of the audit report.
- (b) (c) Department examiners, in conducting a review of an independent auditor's work papers, under this section, may make and retain copies photocopies of the pertinent audit work papers. and communications. A review of an independent auditor's work papers and communications shall be under this section is considered an investigation, and all work papers and communications obtained or copied during the course of that the investigation are confidential under IC 27-1-3.1-15.

SECTION 364. IC 27-1-3.5-14 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 14. (a) In response to a written application from a domestic an insurer, the commissioner may grant an exemption from compliance with this chapter if the commissioner finds, upon review of the application, that compliance with this chapter would constitute a financial or an organizational hardship upon the domestic insurer. An exemption may be granted at any time for a specified period.

(b) Within ten (10) days after the denial of a domestic an insurer's

written request for an exemption from this chapter, the insurer may, in writing, request a hearing on its application for an exemption. The hearing shall be held under IC 4-21.5.

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SECTION 365. IC 27-1-3.5-16 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 16. A domestic insurer that fails to file an audited annual financial report before July 1 or any other deadline established by the commissioner for the insurer under this chapter without having obtained an extension is subject to a civil penalty of fifty dollars (\$50) per day until the report is received prescribed in rules adopted by the commissioner.

SECTION 366. IC 27-1-3.5-18 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 18. (a) In the case of a British or Canadian insurer, the annual audited financial report refers to the annual statement of total business on the form filed by the company with its domiciliary supervision authority audited by an independent auditor. accountant.

(b) For a British or Canadian insurer, the letter required under section 8 of this chapter shall state that the accountant is aware of the requirement requirements relating to the annual audited statement financial report filed with the commissioner under section 6 of this chapter and shall affirm that the opinion expressed is in conformity with those requirements.

SECTION 367. IC 27-1-9-12 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 12. (a) In case of a merger or consolidation between a domestic and a foreign company, the articles of merger or consolidation shall be regarded as executed by the proper officers of said foreign company when such officers are duly authorized to execute same through such action on the part of the directors, shareholders, members, or policyholders of said foreign company as may be required by the laws of the state where the same is incorporated; and upon execution, said articles of merger or consolidation shall be submitted to the commissioner of insurance or other officer at the head of the insurance department of the state where such foreign company is incorporated. No such merger or consolidation shall take effect until it shall have been approved by the insurance official of the state where said foreign company is incorporated nor until a certificate of his approval has been filed in the office of the department of insurance of the state of Indiana. Such submission to and

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approval by the proper official of such other state shall not be required unless the same are required by the laws of such foreign state. The domestic company involved in such merger or consolidation shall not through anything contained in this section be relieved of any of the procedural requirements enumerated in the preceding sections of this article.

(b) No merger or consolidation between a domestic and a foreign company shall take effect, unless and until the surviving or new company, if such is a foreign company, shall file with the department a power of attorney appointing the commissioner and his successors in office, the attorney for service of said foreign company, upon whom all lawful process against said company may be served. Said power of attorney shall be irrevocable so long as said foreign company has outstanding in this state any contract of insurance, or other obligation whatsoever, and shall by its terms so provide. Service upon the commissioner shall be deemed sufficient service upon the company. complies with IC 27-1-17-4(7).

SECTION 368. IC 27-1-15.6-7 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 7. (a) Unless denied licensure under section 12 of this chapter, a person who has met the requirements of sections 5 and 6 of this chapter shall be issued an insurance producer license. An insurance producer may receive qualification for a license in one (1) or more of the following lines of authority:

- (1) Life insurance coverage on human lives, including benefits of endowment and annuities, that may include benefits in the event of death or dismemberment by accident and benefits for disability income.
- (2) Accident and health or sickness insurance coverage for sickness, bodily injury, or accidental death that may include benefits for disability income.
- (3) Property insurance coverage for the direct or consequential loss of or damage to property of every kind.
 - (4) Casualty insurance coverage against legal liability, including liability for death, injury, or disability, or for damage to real or personal property.
- (5) Variable life and variable annuity products insurance coverage provided under variable life insurance contracts and

1	variable annuities.
2	(6) Personal lines — property and casualty insurance coverage
3	sold to individuals and families for primarily noncommercial
4	purposes.
5	(7) Credit — limited line credit insurance.
6	(8) Title — insurance coverage against loss or damage on account
7	of encumbrances on or defects in the title to real estate.
8	(9) Any other line of insurance permitted under Indiana laws or
9	administrative rules.
10	(b) A person who requests and receives qualification under
11	subsection (a)(5) for variable life and annuity products:
12	(1) is considered to have requested; and
13	(2) shall receive;
14	a life qualification under subsection (a)(1). The insurance producer's
15	license document must clearly indicate that the life qualification
16	received under this subsection includes a qualification for variable
17	life and variable annuity products.
18	(c) A resident insurance producer may not request separate
19	qualifications for property insurance and casualty insurance under
20	subsection (a).
21	(d) An insurance producer license remains in effect unless revoked
22	or suspended, as long as the renewal fee set forth in section 32 of this
23	chapter is paid and the educational requirements for resident individual
24	producers are met by the due date.
25	(e) An individual insurance producer who:
26	(1) allows the individual insurance producer's license to lapse;
27	and
28	(2) completed all required continuing education before the license
29	expired;
30	may, not more than twelve (12) months after the expiration date of the
31	license, reinstate the same license without the necessity of passing a
32	written examination. A penalty in the amount of three (3) times the
33	unpaid renewal fee shall be required for any renewal fee received after
34	the expiration date of the license. However, the department of
35	insurance may waive the penalty if the renewal fee is received not more
36	than thirty (30) days after the expiration date of the license.
37	(f) A licensed insurance producer who is unable to comply with
38	license renewal procedures due to military service or some other

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extenuating circumstance may request a waiver of the license renewal procedures. The producer may also request a waiver of any examination requirement or any other fine or sanction imposed for failure to comply with the license renewal procedures.

- (g) An insurance producer license shall contain the licensee's name, address, personal identification number, date of issuance, lines of authority, expiration date, and any other information the commissioner considers necessary.
- (h) A licensee shall inform the commissioner of a change of address not more than thirty (30) days after the change by any means acceptable to the commissioner. The failure of a licensee to timely inform the commissioner of a change in legal name or address shall result in a penalty under section 12 of this chapter.
- (i) To assist in the performance of the commissioner's duties, the commissioner may contract with nongovernmental entities, including the National Association of Insurance Commissioners (NAIC), or any affiliates or subsidiaries that the NAIC oversees, to perform ministerial functions, including the collection of fees related to producer licensing, that the commissioner and the nongovernmental entity consider appropriate.
- (j) The commissioner may participate, in whole or in part, with the NAIC or any affiliate or subsidiary of the NAIC in a centralized insurance producer license registry through which insurance producer licenses are centrally or simultaneously effected for states that require an insurance producer license and participate in the centralized insurance producer license registry. If the commissioner determines that participation in the centralized insurance producer license registry is in the public interest, the commissioner may adopt rules under IC 4-22-2 specifying uniform standards and procedures that are necessary for participation in the registry, including standards and procedures for centralized license fee collection.

SECTION 369. IC 27-1-15.6-9 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 9. (a) An individual who applies for an insurance producer license in Indiana and who was previously licensed for the same lines of authority in another state is not required to complete any prelicensing education or examination. However, the exemption provided by this subsection is available only if:

1	(1) the individual is currently licensed in the other state; or
2	(2) the application is received within ninety (90) days after the
3	cancellation of the applicant's previous license and:
4	(A) the other state issues a certification that, at the time of
5	cancellation, the applicant was in good standing in that state;
6	or
7	(B) the state's Producer Database records that are maintained
8	by the National Association of Insurance Commissioners, its
9	affiliates, or its subsidiaries, indicate that the producer is or
0	was licensed in good standing for the line of authority
.1	requested.
2	(b) If a person is licensed as an insurance producer in another state
.3	and moves to Indiana, the person, to be authorized to act as an
4	insurance producer in Indiana, must make application to become a
5	resident licensee under section 6 of this chapter within ninety (90) days
6	after establishing legal residence in Indiana. However, the person is not
7	required to take prelicensing education or examination to obtain a
8	license for any line of authority for which the person held a license in
9	the other state unless the commissioner determines otherwise by rule.
20	(c) An individual who:
21	(1) has attained the designation of chartered life underwriter,
22	certified financial planner, or chartered financial consultant, or
23	another nationally recognized designation approved by the
24	commissioner or the National Association of Insurance
25	Commissioners; and
26	(2) applies for an insurance producer license in Indiana requesting
27	qualification under sections:
28	(A) $7(a)(1)$;
29	(B) $7(a)(2)$; or
0	(C) $7(a)(5)$;
31	of this chapter;
32	is not required to complete prelicensing education and is required to
3	take only the portion of the examination required under section 5(b) of
4	this chapter that pertains to Indiana laws and rules.
35	(d) An individual who: has:
66	(1) has attained the designation of chartered property and casualty
37	underwriter, certified insurance counselor, or accredited advisor
8	in insurance, or another nationally recognized designation

1	approved by the commissioner or the National Association of
2	Insurance Commissioners; and
3	(2) applies for an insurance producer license in Indiana requesting
4	qualification under sections:
5	(A) $7(a)(3)$;
6	(B) $7(a)(4)$; or
7	(C) $7(a)(6)$;
8	of this chapter;
9	is not required to complete prelicensing education and is required to
10	take only the portion of the examination required under section 5(b) of
11	this chapter that pertains to Indiana laws and rules.
12	(e) An individual who:
13	(1) has attained a bachelor's degree in insurance; and
14	(2) applies for an insurance producer license in Indiana
15	requesting qualification under section $7(a)(1)$ through $7(a)(6)$
16	of this chapter;
17	is not required to complete prelicensing education and is required
18	to take only the part of the examination required under section
19	5(b) of this chapter that pertains to Indiana laws and rules.
20	SECTION 370. IC 27-1-15.6-12, AS AMENDED BY P.L.27-2007,
21	SECTION 26, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
22	JULY 1, 2009]: Sec. 12. (a) For purposes of this section, "permanently
23	revoke" means that:
24	(1) the producer's license shall never be reinstated; and
25	(2) the former licensee, after the license revocation, is not eligible
26	to submit an application for a license to the department.
27	(b) The commissioner may reprimand, levy a civil penalty, place
28	an insurance producer on probation, suspend an insurance producer's
29	license, revoke an insurance producer's license for a period of years,
30	permanently revoke an insurance producer's license, or refuse to issue
31	or renew an insurance producer license, or take any combination of
32	these actions, for any of the following causes:
33	(1) Providing incorrect, misleading, incomplete, or materially
34	untrue information in a license application.
35	(2) Violating:
36	(A) an insurance law;
37	(B) a regulation;
38	(C) a subpoena of an insurance commissioner; or

1	(D) an order of an insurance commissioner;
2	of Indiana or of another state.
3	(3) Obtaining or attempting to obtain a license through
4	misrepresentation or fraud.
5	(4) Improperly withholding, misappropriating, or converting any
6	monies or properties received in the course of doing insurance
7	business.
8	(5) Intentionally misrepresenting the terms of an actual or
9	proposed insurance contract or application for insurance.
10	(6) Having been convicted of a felony.
11	(7) Admitting to having committed or being found to have
12	committed any unfair trade practice or fraud in the business of
13	insurance.
14	(8) Using fraudulent, coercive, or dishonest practices, or
15	demonstrating incompetence, untrustworthiness, or financial
16	irresponsibility in the conduct of business in Indiana or elsewhere.
17	(9) Having an insurance producer license, or its equivalent,
18	denied, suspended, or revoked in any other state, province,
19	district, or territory.
20	(10) Forging another's name to an application for insurance or to
21	any document related to an insurance transaction.
22	(11) Improperly using notes or any other reference material to
23	complete an examination for an insurance license.
24	(12) Knowingly accepting insurance business from an individual
25	who is not licensed.
26	(13) Failing to comply with an administrative or court order
27	imposing a child support obligation.
28	(14) Failing to pay state income tax or to comply with any
29	administrative or court order directing payment of state income
30	tax.
31	(15) Failing to satisfy the continuing education requirements
32	established by IC 27-1-15.7.
33	(16) Violating section 31 of this chapter.
34	(17) Failing to timely inform the commissioner of a change in
35	legal name or address, in violation of section 7(h) of this chapter.
36	(c) The commissioner shall refuse to:
37	(1) issue a license; or
38	(2) renew a license issued;

under this chapter to any person who is the subject of an order issued by a court under IC 31-14-12-7 or IC 31-16-12-10 (or IC 31-1-11.5-13(m) or IC 31-6-6.1-16(m) before their repeal).

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- (d) If the commissioner refuses to renew a license or denies an application for a license, the commissioner shall notify the applicant or licensee and advise the applicant or licensee, in a writing sent through regular first class mail, of the reason for the denial of the applicant's application or the nonrenewal of the licensee's license. The applicant or licensee may, not more than sixty-three (63) days after notice of denial of the applicant's application or nonrenewal of the licensee's license is mailed, make written demand to the commissioner for a hearing before the commissioner to determine the reasonableness of the commissioner's action. The hearing shall be held not more than thirty (30) days after the applicant or licensee makes the written demand, and shall be conducted under IC 4-21.5.
- (e) The license of a business entity may be suspended, revoked, or refused if the commissioner finds, after hearing, that a violation of an individual licensee acting on behalf of the partnership or corporation was known or should have been known by one (1) or more of the partners, officers, or managers of the partnership or corporation and:
 - (1) the violation was not reported to the commissioner; and
 - (2) no corrective action was taken.
- (f) In addition to or in lieu of any applicable denial, suspension, or revocation of a license under subsection (b), a person may, after a hearing, be subject to the imposition by the commissioner under subsection (b) of a civil penalty of not less than fifty dollars (\$50) and not more than ten thousand dollars (\$10,000). A penalty imposed under this subsection may be enforced in the same manner as a civil judgement.
- (g) A licensed insurance producer or limited lines producer shall, not more than ten (10) days after the producer receives a request in a registered or certified letter from the commissioner, furnish the commissioner with a full and complete report listing each insurer with which the licensee has held an appointment during the year preceding the request.
- (h) If a licensee fails to provide the report requested under subsection (g) not more than ten (10) days after the licensee receives the request, the commissioner may, in the commissioner's sole

discretion, without a hearing, and in addition to any other sanctions 1 2 allowed by law, suspend any insurance license held by the licensee 3 pending receipt of the appointment report. 4 (i) The commissioner shall promptly notify all appointing insurers 5 and the licensee regarding any suspension, revocation, or termination of a license by the commissioner under this section. 6 7 (j) The commissioner may not grant, renew, continue, or permit to 8 continue any license if the commissioner finds that the license is being 9 used or will be used by the applicant or licensee for the purpose of 10 writing controlled business. As used in this subsection, "controlled 11 business" means: 12 (1) insurance written on the interests of: 13 (A) the applicant or licensee; 14 (B) the applicant's or licensee's immediate family; or 15 (C) the applicant's or licensee's employer; or (2) insurance covering: 16 17 (A) the applicant or licensee; 18 (B) members of the applicant's or licensee's immediate family; 19 20 (C) either: 21 (i) a corporation, limited liability company, association, or 2.2. partnership; or 23 (ii) the officers, directors, substantial stockholders, partners, 24 members, managers, employees of such a corporation, 25 limited liability company, association, or partnership; 26 of which the applicant or licensee or a member of the 27 applicant's or licensee's immediate family is an officer, 28 director, substantial stockholder, partner, member, manager, 29 associate, or employee. 30 However, this section does not apply to insurance written or interests 31 insured in connection with or arising out of credit transactions. A 32 license is considered to have been used or intended to be used for the 33 purpose of writing controlled business if the commissioner finds that 34 during any twelve (12) month period the aggregate commissions earned 35 from the controlled business exceeded twenty-five percent (25%) of the 36 aggregate commission earned on all business written by the applicant 37 or licensee during the same period.

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(k) The commissioner has the authority to:

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1	(1) enforce the provisions of; and
2	(2) impose any penalty or remedy authorized by;
3	this chapter or any other provision of this title against any person who
4	is under investigation for or charged with a violation of this chapter or
5	any other provision of this title, even if the person's license or
6	registration has been surrendered or has lapsed by operation of law.
7	(l) For purposes of this section, the violation of any provision of
8	IC 28 concerning the sale of a life insurance policy or an annuity
9	contract shall be considered a violation described in subsection (b)(2).
10	(m) The commissioner may order a licensee to make restitution if
11	the commissioner finds that the licensee has committed a violation
12	described in:
13	(1) subsection (b)(4);
14	(2) subsection (b)(7);
15	(3) subsection (b)(8); or
16	(4) subsection (b)(16).
17	(n) The commissioner shall notify the securities commissioner
18	appointed under IC 23-19-6-1(a) when an administrative action or civil
19	proceeding is filed under this section and when an order is issued under
20	this section denying, suspending, or revoking a license.
21	SECTION 371. IC 27-1-15.7-2, AS AMENDED BY P.L.173-2007,
22	SECTION 14, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
23	JULY 1, 2009]: Sec. 2. (a) Except as provided in subsection (b), to
24	renew a license issued under IC 27-1-15.6,
25	(1) a resident insurance producer must complete at least twenty
26	(20) twenty-four (24) hours of credit in continuing education
27	courses. and
28	(2) a resident limited lines producer must complete at least five
29	(5) hours of credit in continuing education courses.
30	An attorney in good standing who is admitted to the practice of law in
31	Indiana and holds a license issued under IC 27-1-15.6 may complete all
32	or any number of hours of continuing education required by this
33	subsection by completing an equivalent number of hours in continuing
34	legal education courses that are related to the business of insurance.
35	(b) To renew a license issued under IC 27-1-15.6, a limited lines
36	producer with a title qualification under IC 27-1-15.6-7(a)(8) must
37	complete at least seven (7) hours of credit in continuing education

courses related to the business of title insurance with at least one (1)

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hour of instruction in a structured setting or comparable self-study in
each of the following:

(1) Ethical practices in the marketing and selling of title
insurance.

(2) Title insurance underwriting.

(3) Escrow issues.

(4) Principles of the federal Real Estate Settlement Procedures Act (12 U.S.C. 2608).

An attorney in good standing who is admitted to the practice of law in Indiana and holds a license issued under IC 27-1-15.6 with a title qualification under IC 27-1-15.6-7(a)(8) may complete all or any number of hours of continuing education required by this subsection by completing an equivalent number of hours in continuing legal education courses related to the business of title insurance or any aspect of real property law.

- (c) The following insurance producers are not required to complete continuing education courses to renew a license under this chapter:
 - (1) A limited lines producer who is licensed without examination under IC 27-1-15.6-18(1) or IC 27-1-15.6-18(2).
 - (2) A limited line credit insurance producer.
 - (3) **Before July 1, 2011,** an insurance producer who:
- (A) is at least seventy (70) years of age; and
- **(B)** has been a licensed insurance producer continuously for at
 24 least twenty (20) years immediately preceding the license
 25 renewal date.
 - (d) To satisfy the requirements of subsection (a) or (b), a licensee may use only those credit hours earned in continuing education courses completed by the licensee:
 - (1) after the effective date of the licensee's last renewal of a license under this chapter; or
 - (2) if the licensee is renewing a license for the first time, after the date on which the licensee was issued the license under this chapter.
 - (e) If an insurance producer receives qualification for a license in more than one (1) line of authority under IC 27-1-15.6, the insurance producer may not be required to complete a total of more than twenty (20) hours of credit in continuing education courses to renew the license.

1	(f) Except as provided in subsection (g), a licensee may receive
2	credit only for completing continuing education courses that have been
3	approved by the commissioner under section 4 of this chapter.
4	(g) A licensee who teaches a course approved by the commissioner
5	under section 4 of this chapter shall receive continuing education credit
6	for teaching the course.
7	(h) When a licensee renews a license issued under this chapter, the
8	licensee must submit:
9	(1) a continuing education statement that:
.0	(A) is in a format authorized by the commissioner;
.1	(B) is signed by the licensee under oath; and
2	(C) lists the continuing education courses completed by the
.3	licensee to satisfy the continuing education requirements of
4	this section; and
.5	(2) any other information required by the commissioner.
6	(i) A continuing education statement submitted under subsection (h)
7	may be reviewed and audited by the department.
8	(j) A licensee shall retain a copy of the original certificate of
9	completion received by the licensee for completion of a continuing
20	education course.
21	(k) A licensee who completes a continuing education course that:
22	(1) is approved by the commissioner under section 4 of this
23	chapter;
24	(2) is held in a classroom setting; and
25	(3) concerns ethics;
26	shall receive continuing education credit for the number of hours for
27	which the course is approved plus additional hours, not to exceed two
28	(2) hours in a renewal period, equal to the number of hours for which
29	the course is approved.
0	SECTION 372. IC 27-1-15.7-5 IS AMENDED TO READ AS
31	FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 5. (a) To qualify as a
32	certified prelicensing course of study for purposes of IC 27-1-15.6-6,
33	an insurance producer program of study must meet all of the following
34	criteria:
35	(1) Be conducted or developed by an:
66	(A) insurance trade association;
37	(B) accredited college or university;
8	(C) educational organization certified by the insurance

1	producer education and continuing education advisory council;
2	or
3	(D) insurance company licensed to do business in Indiana.
4	(2) Provide for self-study or instruction provided by an approved
5	instructor in a structured setting, as follows:
6	(A) For life insurance producers, not less than twenty-four (24)
7	twenty (20) hours of instruction in a structured setting or
8	comparable self-study on:
9	(i) ethical practices in the marketing and selling of
10	insurance;
11	(ii) requirements of the insurance laws and administrative
12	rules of Indiana; and
13	(iii) principles of life insurance.
14	(B) For health insurance producers, not less than twenty-four
15	(24) twenty (20) hours of instruction in a structured setting or
16	comparable self-study on:
17	(i) ethical practices in the marketing and selling of
18	insurance;
19	(ii) requirements of the insurance laws and administrative
20	rules of Indiana; and
21	(iii) principles of health insurance.
22	(C) For life and health insurance producers, not less than forty
23	(40) hours of instruction in a structured setting or comparable
24	self-study on:
25	(i) ethical practices in the marketing and selling of
26	insurance;
27	(ii) requirements of the insurance laws and administrative
28	rules of Indiana;
29	(iii) principles of life insurance; and
30	(iv) principles of health insurance.
31	(D) For property and casualty insurance producers, not less
32	than forty (40) hours of instruction in a structured setting or
33	comparable self-study on:
34	(i) ethical practices in the marketing and selling of
35	insurance;
36	(ii) requirements of the insurance laws and administrative
37	rules of Indiana;
38	(iii) principles of property insurance; and

1	(iv) principles of liability insurance.
2	(E) For personal lines producers, a minimum of twenty-four
3	(24) twenty (20) hours of instruction in a structured setting or
4	comparable self-study on:
5	(i) ethical practices in the marketing and selling of
6	insurance;
7	(ii) requirements of the insurance laws and administrative
8	rules of Indiana; and
9	(iii) principles of property and liability insurance applicable
10	to coverages sold to individuals and families for primarily
11	noncommercial purposes.
12	(F) For title insurance producers, not less than ten (10) hours
13	of instruction in a structured setting or comparable self-study
14	on:
15	(i) ethical practices in the marketing and selling of title
16	insurance;
17	(ii) requirements of the insurance laws and administrative
18	rules of Indiana;
19	(iii) principles of title insurance, including underwriting and
20	escrow issues; and
21	(iv) principles of the federal Real Estate Settlement
22	Procedures Act (12 U.S.C. 2608).
23	(3) Instruction provided in a structured setting must be provided
24	only by individuals who meet the qualifications established by the
25	commissioner under subsection (b).
26	(b) The commissioner, after consulting with the insurance producer
27	education and continuing education advisory council, shall adopt rules
28	under IC 4-22-2 prescribing the criteria that a person must meet to
29	render instruction in a certified prelicensing course of study.
30	(c) The commissioner shall adopt rules under IC 4-22-2 prescribing
31	the subject matter that an insurance producer program of study must
32	cover to qualify for certification as a certified prelicensing course of
33	study under this section.
34	(d) The commissioner may make recommendations that the
35	commissioner considers necessary for improvements in course
36	materials.
37	(e) The commissioner shall designate a program of study that meets
38	the requirements of this section as a certified prelicensing course of

study for purposes of IC 27-1-15.6-6.

(f) The commissioner may, after notice and opportunity for a hearing, withdraw the certification of a course of study that does not maintain reasonable standards, as determined by the commissioner for the protection of the public.

(g) Current course materials for a prelicensing course of study that is certified under this section must be submitted to the commissioner upon request, but not less frequently than once every three (3) years.

SECTION 373. IC 27-1-17-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 3. No foreign or alien insurance company shall be admitted to do business in this state having a name which, at the date of such admission, could not be taken by a domestic corporation under the provisions of IC 27-1-6-3, except that the name of a foreign or alien insurance company need not include the word "company", "corporation", "incorporated", or "mutual", or one (1) of the abbreviations thereof, nor the word "insurance" or the word "assurance" provided the name of such company is authorized by the laws of the state or territory of its organization or domicile and provided such name does not negate the characteristic of such company as an insurance company. No such foreign or alien insurance company after it has been admitted shall, by amendment to its charter, assume any name which, at the date of the filing of such amendment as provided in this chapter, could not be taken by a domestic corporation under the provisions of IC 27-1-6-3.

SECTION 374. IC 27-1-17-4, AS AMENDED BY P.L.193-2006, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 4. Whenever a foreign or an alien insurance company desires to be admitted to do an insurance business in this state, it shall execute in the English language and present the following to the department, at its office, accompanied by the fees prescribed by law:

- (1) A copy of its articles of incorporation or association, with all amendments thereto, duly authenticated by the proper officer of the state, country, province, or government wherein it is incorporated or organized, or the state in which it is domiciled in the United States.
- (2) An application for admission, executed in the manner provided in this chapter, setting forth:

1	(A) the name of such company;
2	(B) the location of its principal office or place of business
3	without this state;
4	(C) the names of the states in which it has been admitted or
5	qualified to do business;
6	(D) the character of insurance business under its articles of
7	incorporation or association which it intends to transact in this
8	state, which must conform to the class or classes set forth in
9	the provisions of IC 27-1-5-1;
10	(E) the total authorized capital stock of the company and the
11	amount thereof issued and outstanding, and the surplus
12	required of such company by the laws of the state, country,
13	province, or government under which it is organized, or the
14	state in which it is domiciled in the United States, if a stock
15	company, which shall equal at least the requirements set forth
16	in section 5(a) of this chapter;
17	(F) the total amount of assets and the surplus of assets over all
18	its liabilities, if other than a stock company, which shall equal
19	at least the requirements set forth in section 5(b) of this
20	chapter;
21	(G) if an alien company, the surplus of assets invested
22	according to the laws of the state in the United States where it
23	has its deposit, which shall equal at least the requirements set
24	forth in section 5(c) of this chapter; and
25	(H) such further and additional information as the department
26	may from time to time require.
27	The application shall be signed, in duplicate in the form
28	prescribed by the department, by the president or a vice president
29	and the secretary or an assistant secretary of the corporation, and
30	verified under oath by the officers signing the same.
31	(3) A statement of its financial condition and business, in the form
32	prescribed by law for annual statements, signed and sworn to by
33	the president or secretary or other principal officers of the
34	company; provided, however, that an alien company shall also
35	furnish a separate statement comprising only its condition and
36	business in the United States, which shall be signed and sworn to
37	by its United States manager.
38	(4) A copy of the last report of examination certified to by the

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insurance commissioner or other proper supervisory official of the state in which such company is domiciled; provided, however, that the commissioner may cause an examination to be made of the condition and affairs of such company before authority to transact business in this state is given.

- (5) A certificate from the proper official of the state, country, province, or government wherein it is incorporated or organized, or the state in which it is domiciled in the United States, that it is duly organized or incorporated under those laws and authorized to make the kind or kinds of insurance which it proposes to make in this state.
- (6) A copy of its bylaws or regulations, if any, certified to by the secretary or similar officer of the insurance company.
- (7) A duly executed power of attorney in a form prescribed by the department which constitutes and appoints an individual or a corporate resident of Indiana, or an authorized Indiana insurer, as the insurance company's agent, its true and lawful attorney upon whom, except as provided in section 4.2 of this chapter, all lawful processes in any action in law or in equity against it shall be served. Such power of attorney shall contain an agreement by the insurance company that any lawful process against it which may be served upon the agent as its attorney shall be of the same force and validity as if served upon the insurance company and that such power of attorney shall continue in force and be irrevocable so long as any liability of the insurance company remains outstanding in this state. Such power of attorney shall be executed by the president and secretary of the insurance company or other duly authorized officers under its seal and shall be accompanied by a certified copy of the resolution of the board of directors of the company making said appointment and authorizing the execution of said power of attorney. Service of any lawful process shall be by delivering to and leaving with the agent two (2) copies of such process, with copy of the pertinent complaint attached. The agent shall forthwith transmit to the defendant company at its last known principal place of business by registered or certified mail, return receipt requested, one (1) of the copies of such process, with complaint attached, the other copy to be retained in a record which shall show all process served upon and transmitted

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by him. Such service shall be sufficient provided the returned receipt or, if the defendant company shall refuse to accept such mailing, the registered mail together with an affidavit of plaintiff or his attorney stating that service was made upon the agent and forwarded as above set forth but that such mail was returned by the post office department is filed with the court. The agent shall make information and receipts available to plaintiff, defendant, or their attorneys. No plaintiff or complainant shall be entitled to a judgment by default based on service authorized by this section until the expiration of at least thirty (30) days from the date on which either the post office receipt or the unclaimed mail together with affidavit is filed with the court. Nothing in this section shall limit or abridge the right to serve any process, notice, or demand upon any company in any other manner permitted by law.

(8) Proof which satisfies the department that it has complied with the financial requirements imposed in this chapter upon foreign and alien insurance companies which transact business in this state and that it is entitled to public confidence and that its admission to transact business in this state will not be prejudicial to public interest.

SECTION 375. IC 27-1-18-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 4. (a) Any foreign or alien corporation admitted to do business in this state may alter or enlarge the character of the business which it is authorized to transact in this state under its articles of incorporation or association, and any amendments thereof filed with the department as provided in section 3 of this chapter, by procuring an amended certificate of authority from the department in the manner provided in subsection (b).

(b) Whenever a foreign or alien corporation desires to procure such amended certificate, it shall present to the department at its office, accompanied by the fees prescribed by law, an application for an amended certificate of authority, setting forth the change desired in the kind or kinds of insurance business under its articles of incorporation or association which it intends to thereafter carry on in this state; the application shall be filed in duplicate in the form prescribed by the department by the president or a vice president and the secretary or an assistant secretary of the corporation, and verified by the oaths of the officers signing the same.

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(c) Upon the presentation of such application, accompanied by the corporation's certificate of authority, the department, if it find finds that it conforms to law and that the foreign or alien company has fulfilled the requirements set forth in subsection (b) and in section 3 of this chapter, may endorse its approval upon each of the duplicate copies of the application, and, in case of the approval of such application and when all fees required by law shall have been paid, shall file one (1) copy of the application in its office, cancel the certificate of authority presented with the application, and issue to the corporation a new certificate of authority, which certificate shall set forth the kind or kinds of business that the corporation is authorized thereafter to transact in this state, which shall be accompanied by one (1) copy of the application bearing the endorsement of the approval of the department.

(d) Upon the issuance of the new certificate of authority by the department, the corporation therein named shall have authority thereafter to transact in this state the kind or kinds of insurance business set forth in such certificate, subject to the terms and conditions prescribed in this article.

SECTION 376. IC 27-1-20-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 8. (a) As used in this section:

"Securities" means instruments as defined in IC 26-1-8.1-102.

"Broker dealer" means an entity that:

- (1) is registered with and subject to the jurisdiction of the Securities and Exchange Commission;
- (2) maintains membership in the Securities Investor Protection Corporation; and
- (3) has a tangible net worth of at least two hundred fifty million dollars (\$250,000,000).

"Clearing corporation" means a corporation as defined in IC 26-1-8.1-102 except that with respect to securities issued by institutions organized or existing under the laws of any foreign country or securities used to meet the deposit requirements pursuant to the laws of a foreign country as a condition of doing business therein. "Clearing corporation" may include a corporation organized or existing under the laws of any foreign country and which is legally qualified under such laws to effect transactions in securities by computerized book entry.

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"Direct participant" means a bank, trust company, or safety deposit company approved by the commissioner which maintains an account in its name in a clearing corporation and through which an insurance company participates in a clearing corporation.

"Federal Reserve book-entry system" means the computerized systems sponsored by the United States Department of the Treasury and certain agencies and instrumentalities of the United States for holding and transferring securities of the United States government and such agencies and instrumentalities, respectively, in Federal Reserve Banks through banks which are members of the Federal Reserve System, or which otherwise have access to such computerized systems.

"Member bank" means a national bank, state bank, or trust company which is a member of the Federal Reserve System and through which an insurance company participates in the Federal Reserve book-entry system.

"Securities" means instruments as defined in IC 26-1-8.1-102.

(b) Notwithstanding any other provision of law, a domestic insurance company may deposit or arrange for the safekeeping of securities held in or purchased for its general account and its separate accounts in a clearing corporation or the Federal Reserve book-entry system. When securities are deposited with a clearing corporation, certificates representing securities of the same class of the same issuer may be merged and held in bulk in the name of the nominee of such clearing corporation with any other securities deposited with such clearing corporation by any person, regardless of the ownership of such securities, and certificates representing securities of small denominations may be merged into one (1) or more certificates of larger denominations. The records of any member bank or broker dealer through which an insurance company holds securities in the Federal Reserve book-entry system, and the records of any custodian through which an insurance company holds securities in a clearing corporation, shall at all times show that such securities are held for such insurance company and for which accounts thereof. Ownership of, and other interests in, such securities may be transferred by bookkeeping entry on the books of such clearing corporation or in the Federal Reserve book-entry system without, in either case, physical delivery of certificates representing such securities.

(c) Any Indiana law requiring an insurance company operating

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under the laws of Indiana to deposit assets with the department shall be deemed complied with if such deposit is made pursuant to a written agreement between the insurance company and any bank, trust company or a safety deposit company and approved by the commissioner which limits withdrawals to those sanctioned and approved by the department. Deposits so made shall be credited by the department as deposits in its possession on the basis of the insurance company's affidavit describing such deposits as to amount and nature.

(d) Notwithstanding any other provisions of law, securities eligible for deposit under the insurance law of this state relating to deposit of securities by an insurance company as a condition of commencing or continuing to do an insurance business in this state may be deposited with a clearing corporation or held in the Federal Reserve book-entry system. Securities deposited with a clearing corporation or held in the Federal Reserve book-entry system and used to meet the deposit requirements under the insurance laws of this state shall be under the control of the commissioner and shall not be withdrawn by the insurance company without the approval of the commissioner. Any insurance company holding such securities in such manner shall provide to the commissioner evidence issued by its custodian or a member bank through which such insurance company has deposited securities with a clearing corporation or held in the Federal Reserve book-entry system, respectively, in order to establish that the securities are actually recorded in an account in the name of the custodian or other direct participant or member bank and evidence that the records of the custodian, other participant, or member bank reflect that such securities are held subject to the order of the commissioner.

(e) The commissioner of insurance is authorized to promulgate rules and regulations governing the deposit by insurance companies of securities with clearing corporations and in the Federal Reserve book-entry system.

SECTION 377. IC 27-1-23-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 4. (a) Material transactions within an insurance holding company system to which an insurer subject to registration is a party shall be subject to the following standards:

- (1) The terms shall be fair and reasonable.
- 38 (2) The charges or fees for services performed shall be

1	reasonable.
2	(3) The expenses incurred for any payment received shall be
3	allocated to the insurer in conformity with customary insurance
4	accounting practices consistently applied.
5	(4) The books, accounts, and records of each party as to all
6	transactions described in this subsection shall be so maintained as
7	to clearly and accurately disclose the precise nature and details of
8	the transactions, including accounting information necessary to
9	support the reasonableness of the charges or fees to the respective
10	parties.
11	(5) The insurer's surplus as regards policyholders following any
12	transactions with affiliates or shareholder dividend shall be
13	reasonable in relation to the insurer's outstanding liabilities and
14	adequate to its financial needs.
15	(b) The following transactions involving a domestic insurer and any
16	person in its insurance holding company system may not be entered
17	into unless the insurer has notified the commissioner in writing of its
18	intention to enter into such transaction at least thirty (30) days prior
19	thereto, or such shorter period as the commissioner may permit, and the
20	commissioner has not disapproved it within that period:
21	(1) Sales, purchases, exchanges, loans or extensions of credit,
22	guarantees, or investments, provided those transactions are equal
23	to or exceed:
24	(A) with respect to nonlife insurers, the lesser of three percent
25	(3%) of the insurer's admitted assets or twenty-five percent
26	(25%) of surplus as regards policyholders; and
27	(B) with respect to life insurers, three percent (3%) of the
28	insurer's admitted assets;
29	each as of December 31 next preceding.
30	(2) Loans or extensions of credit to any person who is not an
31	affiliate, where the insurer makes those loans or extensions of
32	credit with the agreement or understanding that the proceeds of
33	such transactions, in whole or in substantial part, are to be used
34	to make loans or extensions of credit to, to purchase assets of, or
35	to make investments in, any affiliate of the insurer making such
36	loans or extensions of credit, provided those transactions are
37	equal to or exceed:
38	(A) with respect to nonlife insurers, the lesser of three percent

1	(3%) of the insurer's admitted assets or twenty-five percent
2	(25%) of surplus as regards policyholders; and
3	(B) with respect to life insurers, three percent (3%) of the
4	insurer's admitted assets;
5	each as of December 31 next preceding.
6	(3) Reinsurance agreements or modifications thereto in which the
7	amount of cash or invested assets transferred by the insurer equals
8	or exceeds five percent (5%) of the insurer's surplus as regards
9	policyholders, as of December 31 next preceding, including those
10	agreements that may require as consideration the transfer of assets
11	from an insurer to a nonaffiliate, if an agreement or understanding
12	exists between the insurer and nonaffiliate that any portion of the
13	assets will be transferred to one (1) or more affiliates of the
14	insurer.
15	(4) Management agreements, service contracts, and cost-sharing
16	arrangements, lease agreements, and tax allocation
17	agreements.
18	(5) Material transactions, specified by rule, that the commissioner
19	determines may adversely affect the interests of the insurer's
20	policyholders.
21	This subsection does not authorize or permit any transactions that, in
22	the case of an insurer not a member of the same insurance holding
23	company system, would be otherwise contrary to law.
24	(c) A domestic insurer may not enter into transactions that are part
25	of a plan or series of like transactions with persons within the insurance
26	holding company system if the purpose of those separate transactions
27	is to avoid the statutory threshold amount and thus avoid the review
28	that would occur otherwise.
29	(d) The commissioner, in reviewing transactions pursuant to
30	subsection (b), shall consider whether the transactions comply with the
31	standards set forth in subsection (a) and whether the transactions may
32	adversely affect the interests of policyholders.
33	(e) The commissioner shall be notified within thirty (30) days of any
34	investment of the domestic insurer in any one (1) corporation if the
35	total investment in that corporation by the insurance holding company
36	system exceeds ten percent (10%) of the corporation's voting securities.
37	(f) For purposes of this chapter, in determining whether an insurer's

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surplus is reasonable in relation to the insurer's outstanding liabilities

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1	and adequate to its financial needs, the following factors, among others,
2	shall be considered:
3	(1) The size of the insurer as measured by its assets, capital and
4	surplus, reserves, premium writings, insurance in force and other
5	appropriate criteria.
6	(2) The extent to which the insurer's business is diversified among
7	the several lines of insurance.
8	(3) The number and size of risks insured in each line of business.
9	(4) The extent of the geographical dispersion of the insurer's
0	insured risks.
1	(5) The nature and extent of the insurer's reinsurance program.
2	(6) The quality, diversification, and liquidity of the insurer's
3	investment portfolio.
4	(7) The recent past and projected future trend in the size of the
.5	insurer's surplus as regards policyholders.
6	(8) The surplus as regards policyholders maintained by other
7	comparable insurers in respect of the factors described in
. 8	subdivisions (1) through (7).
9	(9) The adequacy of the insurer's reserves.
20	(10) The quality and liquidity of investments in subsidiaries,
21	except that the commissioner may discount or treat any such
22	investment in subsidiaries as a disallowed asset for purposes of
23	determining the adequacy of surplus whenever in his judgment
24	such investment so warrants.
2.5	(11) The quality of the earnings of the insurer and the extent to
26	which the reported earnings of the insurer include extraordinary
27	items.
28	(g) No domestic insurer subject to registration under section 3 of
29	this chapter shall pay an extraordinary dividend or make any other
0	extraordinary distribution to its security holders until:
31	(1) thirty (30) days after the commissioner has received notice of
32	the declaration thereof and has not within such period
33	disapproved such payment; or
4	(2) the commissioner shall have approved such payment within
35	such thirty (30) day period.
66	(h) For purposes of subsection (g), an extraordinary dividend or
37	distribution is any dividend or distribution of cash or other property
8	whose fair market value, together with that of other dividends or

1	distributions made within the twelve (12) consecutive months ending
2	on the date on which the proposed dividend or distribution is scheduled
3	to be made, exceeds the greater of:
4	(1) ten percent (10%) of such insurer's surplus as regards
5	policyholders as of the most recently preceding December 31; or
6	(2) the net gain from operations of such insurer, if such insurer is
7	a life insurer, or the net income, if such insurer is not a life
8	insurer, for the twelve (12) month period ending on the most
9	recently preceding December 31.
10	(i) Notwithstanding any other provision of law, a domestic insurer
11	may declare an extraordinary dividend or distribution which is
12	conditional upon the commissioner's approval thereof, but such a
13	declaration shall confer no rights upon shareholders until:
14	(1) the commissioner has approved the payment of such dividend
15	or distribution; or
16	(2) the commissioner has not disapproved the payment within the
17	thirty (30) day period referred to in subsection (g).
18	SECTION 378. IC 27-1-25-1 IS AMENDED TO READ AS
19	FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 1. As used in this
20	chapter:
21	(a) "Administrator" except as provided in section 7.5 of this chapter,
22	means a person who directly or indirectly and on behalf of an insurer
23	underwrites, collects charges or premiums from, or adjusts or settles
24	claims on residents of Indiana in connection with life, annuity, or
25	health coverage offered or provided by an insurer. The term
26	"administrator" does not include the following persons:
27	(1) An employer or a wholly owned direct or indirect subsidiary
28	of an employer acting on behalf of the employees of:
29	(A) the employer;
30	(B) the subsidiary; or
31	(C) an affiliated corporation of the employer.
32	(2) A union acting for its members.
33	(3) An insurer.
34	(4) An insurance producer:
35	(A) that is licensed under IC 27-1-15.6;
36	(B) that has:
37	(i) a life; or
38	(ii) an accident and health or sickness;

1	qualification under IC 27-1-15.6-7; and
2	(C) whose activities are limited exclusively to the sale of
3	insurance.
4	(5) A creditor acting for its debtors regarding insurance covering
5	a debt between them.
6	(6) A trust established under 29 U.S.C. 186 and the trustees,
7	agents, and employees acting pursuant to that trust.
8	(7) A trust that is exempt from taxation under Section 501(a) of
9	the Internal Revenue Code and:
0	(A) the trustees and employees acting pursuant to that trust; or
.1	(B) a custodian and the agents and employees of the custodian
2	acting pursuant to a custodian account that meets the
3	requirements of Section 401(f) of the Internal Revenue Code
.4	(8) A financial institution that is subject to supervision or
.5	examination by federal or state banking authorities to the extent
6	that the financial institution collects and remits premiums to an
.7	insurance producer or an authorized insurer in connection with a
. 8	loan payment.
.9	(9) A credit card issuing company that:
20	(A) advances for; and
21	(B) collects from, when a credit card holder authorizes the
22	collection;
23	credit card holders of the credit card issuing company, insurance
24	premiums or charges.
2.5	(10) A person that adjusts or settles claims in the normal course
26	of the person's practice or employment as an attorney at law and
27	that does not collect charges or premiums in connection with life
28	annuity, or health coverage.
29	(11) A health maintenance organization that has a certificate of
30	authority issued under IC 27-13.
31	(12) A limited service health maintenance organization that has
32	a certificate of authority issued under IC 27-13.
33	(13) A mortgage lender to the extent that the mortgage lender
34	collects and remits premiums to an insurance producer or an
35	authorized insurer in connection with a loan payment.
66	(14) A person that:
37	(A) is licensed as a managing general agent as required under
8	IC 27-1-33; and

1	(B) acts exclusively within the scope of activities provided for
2	under the license referred to in clause (A).
3	(15) A person that:
4	(A) directly or indirectly underwrites, collects charges or
5	premiums from, or adjusts or settles claims on residents of
6	Indiana in connection with life, annuity, or health coverage
7	provided by an insurer;
8	(B) is affiliated with the insurer; and
9	(C) performs the duties specified in clause (A) only according
10	to a contract between the person and the insurer for the direct
11	and assumed life, annuity, or health coverage provided by the
12	insurer.
13	(b) "Affiliate" means an entity or a person that:
14	(1) directly or indirectly through an intermediary controls or is
15	controlled by; or
16	(2) is under common control with;
17	a specified entity or person.
18	(c) "Church plan" has the meaning set forth in IC 27-8-10-1.
19	(d) "Commissioner" refers to the insurance commissioner appointed
20	under IC 27-1-1-2.
21	(e) "Control" means the direct or indirect possession of the power
22	to direct or cause the direction of the management and policies of a
23	person, whether:
24	(1) through ownership of voting securities;
25	(2) by contract other than a commercial contract for goods or
26	nonmanagement services; or
27	(3) otherwise;
28	unless the power is the result of an official position with the person or
29	a corporate office held by the person. Control is presumed to exist if a
30	person directly or indirectly owns, controls, holds with the power to
31	vote, or holds proxies representing not less than ten percent (10%) of
32	the voting securities of another person.
33	(f) "Covered individual" means an individual who is covered under
34	a benefit program provided by an insurer.
35	(g) "Financial institution" means a bank, savings association, credit
36	union, or any other institution regulated under IC 28 or federal law.
37	(h) "GAAP" refers to consistently applied United States generally
38	accepted accounting principles.

(i) "Governmental plan" has the meaning set forth in IC 27-8-10-1.

2	(j) "Home state" means the District of Columbia or any state or
3	territory of the United States in which an administrator is incorporated
4	or maintains the administrator's principal place of business. If the place
5	in which the administrator is incorporated or maintains the
6	administrator's principal place of business is not governed by a law that
7	is substantially similar to this chapter, the administrator's home state is
8	another state:
9	(1) in which the administrator conducts the business of the
10	administrator; and
11	(2) that the administrator declares is the administrator's home
12	state.
13	(k) "Insurance producer" has the meaning set forth in
14	IC 27-1-15.6-2.
15	(1) "Insurer" means:
16	(1) a person who obtains a certificate of authority under:
17	(A) IC 27-1-3-20;
18	(B) IC 27-13-3; or
19	(C) IC 27-13-34; or
20	(2) an employer that provides life, health, or annuity coverage in
21	Indiana under a governmental plan or a church plan.
22	(m) "NAIC" refers to the National Association of Insurance
23	Commissioners.
24	(n) "Negotiate" has the meaning set forth in IC 27-1-15.6-2.
25	(o) "Nonresident administrator" means a person that applies for or
26	holds a license under section 12.2 of this chapter.
27	(p) "Person" has the meaning set forth in IC 27-1-15.6-2.
28	(q) "Sell" has the meaning set forth in IC 27-1-15.6-2.
29	(r) "Solicit" has the meaning set forth in IC 27-1-15.6-2.
30	(s) "Underwrite" refers to the:
31	(1) acceptance of a group application or an individual application
32	for coverage of an individual in accordance with the written rules
33	of the insurer; or
34	(2) planning and coordination of a benefit program provided by
35	an insurer.
36	(t) "Uniform application" means the current version of the NAIC
37	uniform application for third party administrators.
38	SECTION 379. IC 27-1-25-11.1 IS AMENDED TO READ AS

1	FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 11.1. (a) If the home
2	state of a person is Indiana, the person shall:
3	(1) apply to act as an administrator in Indiana upon the uniform
4	application; and
5	(2) pay an application fee in an amount determined by the
6	commissioner; and
7	(2) (3) receive a license from the commissioner;
8	before performing the function of an administrator in Indiana. The
9	commissioner shall deposit a fee paid under subdivision (2) into the
10	department of insurance fund established by IC 27-1-3-28.
11	(b) The uniform application must include or be accompanied by the
12	following:
13	(1) Basic organizational documents of the applicant, including:
14	(A) articles of incorporation;
15	(B) articles of association;
16	(C) partnership agreement;
17	(D) trade name certificate;
18	(E) trust agreement;
19	(F) shareholder agreement;
20	(G) other applicable documents; and
21	(H) amendments to the documents specified in clauses (A)
22	through (G).
23	(2) Bylaws, rules, regulations, or other documents that regulate
24	the internal affairs of the applicant.
25	(3) The NAIC biographical affidavits for individuals who are
26	responsible for the conduct of affairs of the applicant, including:
27	(A) members of the applicant's:
28	(i) board of directors;
29	(ii) board of trustees;
30	(iii) executive committee; or
31	(iv) other governing board or committee;
32	(B) principal officers, if the applicant is a corporation;
33	(C) partners or members, if the applicant is:
34	(i) a partnership;
35	(ii) an association; or
36	(iii) a limited liability company;
37	(D) shareholders or members that hold, directly or indirectly,
38	at least ten percent (10%) of the:

1	(i) voting stock;
2	(ii) voting securities; or
3	(iii) voting interest;
4	of the applicant; and
5	(E) any other person who exercises control or influence over
6	the affairs of the applicant.
7	(4) Financial information reflecting a positive net worth,
8	including:
9	(A) audited annual financial statements prepared by an
10	independent certified public accountant for the two (2) most
11	recent fiscal years; or
12	(B) if the applicant has been in business for less than two (2)
13	fiscal years, financial statements or reports that are:
14	(i) prepared in accordance with GAAP; and
15	(ii) certified by an officer of the applicant;
16	for any completed fiscal years and for any month during the
17	current fiscal year for which financial statements or reports
18	have been completed.
19	If an audited financial statement or report required under clause
20	(A) or (B) is prepared on a consolidated basis, the statement or
21	report must include a columnar consolidating or combining
22	worksheet that includes the amounts shown on the consolidated
23	audited financial statement or report, separately reported on the
24	worksheet for each entity included on the statement or report, and
25	an explanation of consolidating and eliminating entries.
26	(5) Information determined by the commissioner to be necessary
27	for a review of the current financial condition of the applicant.
28	(6) A description of the business plan of the applicant, including:
29	(A) information on staffing levels and activities proposed in
30	Indiana and nationwide; and
31	(B) details concerning the applicant's ability to provide a
32	sufficient number of experienced and qualified personnel for:
33	(i) claims processing;
34	(ii) record keeping; and
35	(iii) underwriting.
36	(7) Any other information required by the commissioner.
37	(c) An administrator that applies for licensure under this section
38	shall make copies of written agreements with insurers available for

1	inspection by the commissioner.
2	(d) An administrator that applies for licensure under this section
3	shall:
4	(1) produce the administrator's accounts, records, and files for
5	examination; and
6	(2) make the administrator's officers available to provide
7	information concerning the affairs of the administrator;
8	whenever reasonably required by the commissioner.
9	(e) The commissioner may refuse to issue a license under this
10	section if the commissioner determines that:
11	(1) the administrator or an individual who is responsible for the
12	conduct of the affairs of the administrator:
13	(A) is not:
14	(i) competent;
15	(ii) trustworthy;
16	(iii) financially responsible; or
17	(iv) of good personal and business reputation; or
18	(B) has had an:
19	(i) insurance certificate of authority or insurance license; or
20	(ii) administrator certificate of authority or administrator
21	license;
22	denied or revoked for cause by any jurisdiction;
23	(2) the financial information provided under subsection (b)(4)
24	does not reflect that the applicant has a positive net worth; or
25	(3) any of the grounds set forth in section 12.4 of this chapter
26	exists with respect to the administrator.
27	(f) An administrator that applies for a license under this section
28	shall immediately notify the commissioner of a material change in:
29	(1) the ownership or control of the administrator; or
30	(2) another fact or circumstance that affects the administrator's
31	qualification for a license.
32	The commissioner, upon receiving notice under this subsection, shall
33	report the change to an electronic data base maintained by the NAIC or
34	an affiliate or a subsidiary of the NAIC.
35	(g) An administrator that applies for a license under this section and
36	will administer a governmental plan or a church plan shall obtain a
37	bond as required under section 4(g) of this chapter.
38	(h) A license that is issued under this section is valid for one (1)

1	year after the date of issuance or until:
2	(1) the license is:
3	(A) surrendered; or
4	(B) suspended or revoked by the commissioner; or
5	(2) the administrator:
6	(A) ceases to do business in Indiana; or
7	(B) is not in compliance with this chapter;
8	whichever occurs first.
9	SECTION 380. IC 27-1-25-12.2, AS AMENDED BY P.L.234-2007,
10	SECTION 191, IS AMENDED TO READ AS FOLLOWS
11	[EFFECTIVE JULY 1, 2009]: Sec. 12.2. (a) An administrator that:
12	(1) performs the duties of an administrator in Indiana; and
13	(2) does not hold a license issued under section 11.1 of this
14	chapter;
15	shall obtain a nonresident administrator license under this section by
16	filing a uniform application, accompanied by an application fee in an
17	amount determined by the commissioner, with the commissioner.
18	The commissioner shall deposit a fee paid under this subsection
19	into the department of insurance fund established by IC 27-1-3-28.
20	(b) Unless the commissioner verifies the nonresident administrator's
21	home state license status through an electronic data base maintained by
22	the NAIC or by an affiliate or a subsidiary of the NAIC, a uniform
23	application filed under subsection (a) must be accompanied by a letter
24	of certification from the nonresident administrator's home state,
25	verifying that the nonresident administrator holds a resident
26	administrator license in the home state.
27	(c) A nonresident administrator is not eligible for a nonresident
28	administrator license under this section unless the nonresident
29	administrator is licensed as a resident administrator in a home state that
30	has a law or regulation that is substantially similar to this chapter.
31	(d) Except as provided in subsections (b) and (h), the commissioner
32	shall issue a nonresident administrator license to a nonresident
33	administrator that makes a filing under subsections (a) and (b) upon
34	receipt of the filing.
35	(e) Unless a nonresident administrator is notified by the
36	commissioner that the commissioner is able to verify the nonresident
37	administrator's home state licensure through an electronic data base

described in subsection (b), the nonresident administrator shall:

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1	(1) on September 15 of each year, file a renewal application and
2	a statement with the commissioner affirming that the nonresident
3	administrator maintains a current license in the nonresident
4	administrator's home state; and
5	(2) pay to the commissioner a filing fee as required in an
6	amount determined by the commissioner.
7	The commissioner shall collect deposit a filing fee required paid under
8	subdivision (2) and deposit the fee into the department of insurance
9	fund established by IC 27-1-3-28.
10	(f) A nonresident administrator that applies for licensure under this
11	section shall:
12	(1) produce the accounts of the nonresident administrator;
13	(2) produce the records and files of the nonresident administrator
14	for examination; and
15	(3) make the officers of the nonresident administrator available to
16	provide information with respect to the affairs of the nonresident
17	administrator;
18	when reasonably required by the commissioner.
19	(g) A nonresident administrator is not required to hold a nonresident
20	administrator license in Indiana if the nonresident administrator's
21	function in Indiana is limited to the administration of life, health, or
22	annuity coverage for a total of not more than one hundred (100) Indiana
23	residents.
24	(h) The commissioner may refuse to issue or may delay the issuance
25	of a nonresident administrator license if the commissioner determines
26	that:
27	(1) due to events occurring; or
28	(2) based on information obtained;
29	after the nonresident administrator's home state's licensure of the
30	nonresident administrator, the nonresident administrator is unable to
31	comply with this chapter or grounds exist for the home state's
32	revocation or suspension of the nonresident administrator's home state
33	license.
34	(i) If the commissioner makes a determination described in
35	subsection (h), the commissioner:
36	(1) shall provide written notice of the determination to the
37	insurance regulator of the nonresident administrator's home state;
38	and

1 (2) may delay the issuance of a nonresident administrator license 2 to the nonresident administrator until the commissioner 3 determines that the nonresident administrator is able to comply 4 with this chapter and that grounds do not exist for the home state's 5 revocation or suspension of the nonresident administrator's home state license. 7 SECTION 381. IC 27-1-25-12.3, AS AMENDED BY P.L.234-2007, 8 SECTION 192, IS AMENDED TO READ AS FOLLOWS 9 [EFFECTIVE JULY 1, 2009]: Sec. 12.3. (a) An administrator that is 10 licensed under section 11.1 of this chapter shall, not later than July 1 11 of each year unless the commissioner grants an extension of time for 12 good cause, file a report for the previous calendar year that complies 13 with the following: 14 (1) The report must contain financial information reflecting a 15 positive net worth prepared in accordance with section 11.1(b)(4) 16 of this chapter. 17 (2) The report must be in the form and contain matters prescribed 18 by the commissioner. 19 (3) The report must be verified by at least two (2) officers of the 20 administrator. 21 (4) The report must include the complete names and addresses of 2.2. insurers with which the administrator had a written agreement 23 during the preceding fiscal year. 24 (5) The report must be accompanied by a filing fee in an amount 25 determined by the commissioner. 26 The commissioner shall collect a filing fee paid under subdivision (5) 27 and deposit the fee into the department of insurance fund established 28 by IC 27-1-3-28. 29 (b) The commissioner shall review a report filed under subsection 30 (a) not later than September 1 of the year in which the report is filed. 31 Upon completion of the review, the commissioner shall: 32 (1) issue a certification to the administrator: 33 (A) indicating that: 34 (i) the financial statement reflects a positive net worth; and 35 (ii) the administrator is currently licensed and in good 36 standing; or 37 (B) noting deficiencies found in the report; or 38 (2) update an electronic data base that is maintained by the NAIC

or by an affiliate or a subsidiary of the NAIC: 1 2 (A) indicating that the administrator is solvent and in 3 compliance with this chapter; or 4 (B) noting deficiencies found in the report. 5 SECTION 382. IC 27-4-5-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 2. (a) It is a Class A 6 7 infraction for an insurer to transact insurance business in this state, as 8 set forth in subsection (b), without a certificate of authority from the 9 commissioner. However, this section does not apply to the following: 10 (1) The lawful transaction of surplus lines insurance. 11 (2) The lawful transaction of reinsurance by insurers. 12 (3) Transactions in this state involving a policy lawfully solicited, 13 written, and delivered outside of this state covering only subjects of insurance not resident, located, or expressly to be performed in 14 15 this state at the time of issuance, and which transactions are 16 subsequent to the issuance of such policy. 17 (4) Attorneys acting in the ordinary relation of attorney and client 18 in the adjustment of claims or losses. (5) Transactions in this state involving group life and group 19 20 sickness and accident or blanket sickness and accident insurance 21 or group annuities where the master policy of such groups was 2.2. lawfully issued and delivered in and pursuant to the laws of a 23 state in which the insurer was authorized to do an insurance 24 business, to a group organized for purposes other than the 25 procurement of insurance, and where the policyholder is 26 domiciled or otherwise has a bona fide situs. 27 (6) Transactions in this state relative to a policy issued or to be 28 issued outside this state involving insurance on vessels, craft or 29 hulls, cargos, marine builder's risk, marine protection and 30 indemnity or other risk, including strikes and war risks commonly 31 insured under ocean or wet marine forms of policy. 32 (7) Transactions in this state involving life insurance, health 33 insurance, or annuities provided to religious or charitable 34 institutions organized and operated without profit to any private 35 shareholder or individual for the benefit of such institutions and 36 individuals engaged in the service of such institutions. 37 (8) Transactions in this state involving contracts of insurance not 38 readily obtainable in the ordinary insurance market and issued to

1	one (1) or more industrial insureds. For purposes of this section,
2	an "industrial insured" means an insured:
3	(A) who procures the insurance of any risk or risks by use of
4	the services of a full-time employee acting as an insurance
5	manager or buyer or the services of a regularly retained and
6	continuously qualified insurance consultant;
7	(B) whose aggregate annual premium for insurance on all risks
8	totals at least twenty-five thousand dollars (\$25,000); and
9	(C) who has at least twenty-five (25) full-time employees;
0	(D) who, on or before February 1 (for the preceding six (6)
1	month period ending December 31) and August 1 (for the
2	preceding six (6) month period ending June 30) of each
3	year, remits to the department an amount equal to two and
4	five-tenths percent (2.5%) of all gross premiums upon all
.5	policies and contracts procured by the insured under this
6	section, plus:
7	(i) ten percent (10%) of the amount due for the first
. 8	month after the date specified in this clause during which
9	the amount described in this clause is not remitted in
20	compliance with this clause; and
21	(ii) an additional one percent (1%) of the amount due for
22	each additional month during which the amount due
23	under this clause is unpaid; and
24	(E) who files with the department, with the amount
25	remitted under clause (D), an affidavit specifying all
26	transactions undertaken and policies and contracts
27	procured during the preceding calendar year, including
28	the following:
29	(i) The description and location of the insured property
0	or risk and the name of the insured.
31	(ii) The gross premiums charged for the policy or
32	contract.
33	(iii) The name and home office address of the insurer
34	that issues the policy or contract and the kind of
55	insurance effected.
66	(iv) A statement that the insured, after diligent effort,
57	was unable to procure from any insurer authorized to
8	transact the particular kind of insurance husiness in

1 Indiana the full amount of insurance coverage required 2 to protect the insured. 3 (9) Transactions in Indiana involving the rendering of any service by any ambulance service provider and all fees, costs, and 4 5 membership payments charged for the service. To qualify under this subdivision, the ambulance service provider: 7 (A) must have its ambulance service program approved by an 8 ordinance of the legislative body of the county or city in which 9 it operates; and 10 (B) may not offer any membership program that includes benefits exceeding one (1) year in duration. 11 12 (b) Any of the following acts in this state effected by mail or 13 otherwise by or on behalf of an unauthorized insurer constitutes the 14 transaction of an insurance business in this state. The venue of an act committed by mail is at the point where the matter transmitted by mail 15 is delivered and takes effect. Unless otherwise indicated, the term 16 "insurer" as used in this section includes all persons engaged as 17 principals in the business of insurance and also includes interinsurance 18 19 exchanges and mutual benefit societies. 20 (1) The making of or proposing to make, as an insurer, an 21 insurance contract. 22 (2) The making of or proposing to make, as guarantor or surety, 23 any contract of guaranty or suretyship as a vocation and not 24 merely incidental to any other legitimate business or activity of 25 the guarantor or surety. (3) The taking or receiving of any application for insurance. 26 27 (4) The receiving or collection of any premium, commission, 28 membership fees, assessments, dues, or other consideration for 29 any insurance or any part thereof. 30 (5) The issuance or delivery of contracts of insurance to residents 31 of this state or to persons authorized to do business in this state. 32 (6) Acting as an agent for or otherwise representing or aiding on 33 behalf of another person or insurer in the solicitation, negotiation, 34 procurement, or effectuation of insurance or renewals thereof or 35 in the dissemination of information as to coverage or rates, or forwarding of applications, or delivery of policies or contracts, or 36

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inspection of risks, a fixing of rates or investigation or adjustment

of claims or losses or in the transaction of matters subsequent to

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2.2.

effectuation of the contract and arising out of it, or representing or assisting a person or an insurer in the transaction of insurance with respect to subjects of insurance resident, located, or to be performed in this state. This subdivision does not prohibit full-time salaried employees of a corporate insured from acting in the capacity of an insurance manager or buyer in placing insurance in behalf of the employer.

(c)(1) The failure of an insurer transacting insurance business in this state to obtain a certificate of authority does not impair the validity of any act or contract of such insurer and does not prevent such insurer from defending any action at law or suit in equity in any court of this state, but no insurer transacting insurance business in this state without a certificate of authority may maintain an action in any court of this state to enforce any right, claim, or demand arising out of the transaction of such business until such insurer obtains a certificate of authority.

(2) In the event of failure of any such unauthorized insurer to pay any claim or loss within the provisions of such insurance contract, any person who assisted or in any manner aided directly or indirectly in the procurement of such insurance contract is liable to the insured for the full amount of the claim or loss in the manner provided by the insurance contract.

SECTION 383. IC 27-7-3-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 3. (a) Any domestic corporation having:

(1) among its purposes the insuring against loss or damage on account of encumbrances upon or defects in the title to real estate; and

(2) a physical office in Indiana;

is hereby authorized to organize under IC 23-1, and any foreign corporation, having among its purposes the insuring against loss or damage on account of encumbrances upon or defects in the title to real estate, is hereby authorized to and may be admitted to do business in this state under IC 23-1. Any domestic or foreign corporation, organized or admitted to do business before or after June 7, 1937, as provided in this section, may engage in business as a title insurance company by complying with the provisions of this chapter.

(b) A domestic corporation admitted to do business as described

1 in subsection (a) shall provide written notice to the department of 2 insurance and all policyholders of a change in location of the 3 domestic corporation's physical office in Indiana, including the 4 address and telephone number of the new location. 5 SECTION 384. IC 27-7-3-3.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS 6 7 [EFFECTIVE JULY 1, 2009]: Sec. 3.5. (a) A domestic corporation 8 admitted to do business as described in section 3 of this chapter is 9 subject to the following: 10 (1) IC 27-1-7-11. 11 (2) IC 27-1-6-21. 12 (3) IC 27-9. 13 (b) A foreign corporation admitted to do business as described 14 in section 3 of this chapter is subject to IC 27-1-17-9. 15 SECTION 385. IC 27-8-5-16.5, AS AMENDED BY P.L.127-2006, 16 SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 17 JULY 1, 2009]: Sec. 16.5. (a) As used in this section, "delivery state" 18 means any state other than Indiana in which a policy is delivered or 19 issued for delivery. 20 (b) Except as provided in subsection (c), (d), or (e), a certificate may 21 not be issued to a resident of Indiana pursuant to a group policy that is 22 delivered or issued for delivery in a state other than Indiana. 23 (c) A certificate may be issued to a resident of Indiana pursuant to 24 a group policy not described in subsection (d) that is delivered or 25 issued for delivery in a state other than Indiana if: 26 (1) the delivery state has a law substantially similar to section 16 27 of this chapter; (2) the delivery state has approved the group policy; and 28 29 (3) the policy or the certificate contains provisions that are: 30 (A) substantially similar to the provisions required by: (i) section 19 of this chapter; 31 32 (ii) section 21 of this chapter; and 33 (iii) IC 27-8-5.6; and 34 (B) consistent with the requirements set forth in: 35 (i) section 24 of this chapter; 36 (ii) IC 27-8-6; 37 (iii) IC 27-8-14; 38 (iv) IC 27-8-23;

1	(v) 760 IAC 1-38.1; and
2	(vi) 760 IAC 1-39.
3	(d) A certificate may be issued to a resident of Indiana under an
4	association group policy, a discretionary group policy, or a trust group
5	policy that is delivered or issued for delivery in a state other than
6	Indiana if:
7	(1) the delivery state has a law substantially similar to section 16
8	of this chapter;
9	(2) the delivery state has approved the group policy; and
10	(3) the policy or the certificate contains provisions that are:
11	(A) substantially similar to the provisions required by:
12	(i) section 19 of this chapter or, if the policy or certificate is
13	described in section 2.5(b)(2) of this chapter, section 2.5 of
14	this chapter;
15	(ii) section 19.2 19.3 of this chapter if the policy or
16	certificate contains a waiver of coverage;
17	(iii) section 21 of this chapter; and
18	(iv) IC 27-8-5.6; and
19	(B) consistent with the requirements set forth in:
20	(i) section 15.6 of this chapter;
21	(ii) section 24 of this chapter;
22	(iii) section 26 of this chapter;
23	(iv) IC 27-8-6;
24	(v) IC 27-8-14;
25	(vi) IC 27-8-14.1;
26	(vii) IC 27-8-14.5;
27	(viii) IC 27-8-14.7;
28	(ix) IC 27-8-14.8;
29	(x) IC 27-8-20;
30	(xi) IC 27-8-23;
31	(xii) IC 27-8-24.3;
32	(xiii) IC 27-8-26;
33	(xiv) IC 27-8-28;
34	(xv) IC 27-8-29;
35	(xvi) 760 IAC 1-38.1; and
36	(xvii) 760 IAC 1-39.
37	(e) A certificate may be issued to a resident of Indiana pursuant to
38	a group policy that is delivered or issued for delivery in a state other

1	than Indiana if the commissioner determines that the policy pursuant
2	to which the certificate is issued meets the requirements set forth in
3	section 17(a) of this chapter.
4	(f) This section does not affect any other provision of Indiana law
5	governing the terms or benefits of coverage provided to a resident of
6	Indiana under any certificate or policy of insurance.
7	SECTION 386. IC 27-8-5-17, AS AMENDED BY P.L.218-2007,
8	SECTION 47, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
9	JULY 1, 2009]: Sec. 17. (a) A group accident and sickness insurance
10	policy shall not be delivered or issued for delivery in Indiana to a group
11	that is not described in section $16(1)(A)$, $16(2)(A)$, $16(3)(A)$, $16(4)(A)$,
12	16(5)(A), 16(6)(A), 16(7), or 16(8) of this chapter unless:
13	(1) the group applies to the commissioner for approval as a
14	discretionary group;
15	(2) the commissioner reviews the group according to the same
16	standards as a group described in section 16 of this chapter;
17	and
18	(3) the commissioner finds that:
19	(1) (A) the issuance of the policy is not contrary to the best
20	interest of the public;
21	(2) (B) the issuance of the policy would result in economies of
22	acquisition or administration; and
23	(3) (C) the benefits of the policy are reasonable in relation to
24	the premiums charged.
25	(b) Except as otherwise provided in this chapter, an insurer may
26	exclude or limit the coverage under a policy described in subsection (a)
27	on any person as to whom evidence of individual insurability is not
28	satisfactory to the insurer.
29	SECTION 387. IC 27-8-8-2, AS AMENDED BY P.L.193-2006,
30	SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
31	JULY 1, 2009]: Sec. 2. (a) The definitions in this section apply
32	throughout this chapter.
33	(b) "Account" means one (1) of the two (2) accounts created under
34	section 3 of this chapter.
35	(c) "Annuity contract", except as provided in section 2.3(e) of this
36	chapter, includes:
37	(1) a guaranteed investment contract;
38	(2) a deposit administration contract;

1	(3) a structured settlement annuity;
2	(4) an annuity issued to or in connection with a government
3	lottery; and
4	(5) an immediate or a deferred annuity contract.
5	(d) "Assessment base year" means, for an impaired insurer or
6	insolvent insurer, the most recent calendar year for which required
7	premium information is available preceding the calendar year during
8	which the impaired insurer's or insolvent insurer's coverage date
9	occurs.
10	(e) "Association", except when the context otherwise requires,
11	means the Indiana life and health insurance guaranty association
12	created by section 3 of this chapter.
13	(f) "Benefit plan" means a specific plan, fund, or program that is
14	established or maintained by an employer or an employee organization,
15	or both, that:
16	(1) provides retirement income to employees; or
17	(2) results in a deferral of income by employees for a period
18	extending to or beyond the termination of employment.
19	(g) "Board" refers to the board of directors of the association
20	selected under IC 27-8-8-4.
21	(h) "Called", when used in the context of assessments, means that
22	notice has been issued by the association to member insurers requiring
23	the member insurers to pay, within a time frame set forth in the notice,
24	an assessment that has been authorized by the board.
25	(i) "Commissioner" refers to the insurance commissioner appointed
26	under IC 27-1-1-2.
27	(j) "Contractual obligation" means an enforceable obligation under
28	a covered policy for which and to the extent that coverage is provided
29	under section 2.3 of this chapter.
30	(k) "Coverage date" means, with respect to a member insurer, the
31	date on which the earlier of the following occurs:
32	(1) The member insurer becomes an insolvent insurer.
33	(2) The association determines that the association will provide
34	coverage under section 5(a) of this chapter with respect to the
35	member insurer.
36	(1) "Covered policy" means a:
37	(1) nongroup policy or contract;
38	(2) certificate under a group policy or contract; or

1	(3) part of a policy, contract, or certificate described in
2	subdivisions (1) and (2);
3	for which coverage is provided under section 2.3 of this chapter.
4	(m) "Extracontractual claims" includes claims that relate to bad faith
5	in the payment of claims, punitive or exemplary damages, or attorney's
6	fees and costs.
7	(n) "Funding agreement" has the meaning set forth in
8	IC 27-1-12.7-1.
9	(o) "Impaired insurer" means a member insurer that is:
10	(1) not an insolvent insurer; and
11	(2) placed under an order of rehabilitation or conservation by a
12	court with jurisdiction.
13	(p) "Insolvent insurer" means a member insurer that is placed under
14	an order of liquidation with a finding of insolvency by a court with
15	jurisdiction.
16	(q) "Member insurer" means any person that holds a certificate of
17	authority to transact in Indiana any kind of insurance for which
18	coverage is provided under section 2.3 of this chapter. The term
19	includes an insurer whose certificate of authority to transact such
20	insurance in Indiana may have been suspended, revoked, not renewed,
21	or voluntarily withdrawn but does not include the following:
22	(1) A for-profit or nonprofit hospital or medical service
23	organization.
24	(2) A health maintenance organization under IC 27-13.
25	(3) A fraternal benefit society under IC 27-11.
26	(4) The Indiana Comprehensive Health Insurance Association or
27	any other mandatory state pooling plan or arrangement.
28	(5) An assessment company or another person that operates on an
29	assessment plan (as defined in IC 27-1-2-3(y)).
30	(6) An interinsurance or reciprocal exchange authorized by
31	IC 27-6-6.
32	(7) A prepaid limited service health maintenance organization or
33	a limited service health maintenance organization under
34	IC 27-13-34.
35	(8) A farm mutual insurance company under IC 27-5.1.
36	(9) A person operating as a Lloyds under IC 27-7-1.
37	(10) The political subdivision risk management fund established
38	by IC 27-1-29-10 and the political subdivision catastrophic

1	liability fund established by IC 27-1-29.1-7.
2	(11) The small employer health reinsurance board established by
3	IC 27-8-15.5-5.
4	(12) (11) A person similar to any person described in subdivisions
5	(1) through (11). (10).
6	(r) "Moody's Corporate Bond Yield Average" means:
7	(1) the monthly average of the composite yield on seasoned
8	corporate bonds as published by Moody's Investors Service, Inc.;
9	or
10	(2) if the monthly average described in subdivision (1) is no
11	longer published, an alternative publication of interest rates or
12	yields determined appropriate by the association.
13	(s) "Multiple employer welfare arrangement" has the meaning set
14	forth in IC 27-1-34-1.
15	(t) "Owner" means the person:
16	(1) identified as the legal owner of a policy or contract according
17	to the terms of the policy or contract; or
18	(2) otherwise vested with legal title to a policy or contract through
19	a valid assignment completed in accordance with the terms of the
20	policy or contract and properly recorded as the owner on the
21	books of the insurer.
22	The term does not include a person with a mere beneficial interest in
23	a policy or contract.
24	(u) "Person" means an individual, a corporation, a limited liability
25	company, a partnership, an association, a governmental entity, a
26	voluntary organization, a trust, a trustee, or another business entity or
27	organization.
28	(v) "Plan sponsor" refers to only one (1) of the following with
29	respect to a benefit plan:
30	(1) The employer, in the case of a benefit plan established or
31	maintained by a single employer.
32	(2) The holding company or controlling affiliate, in the case of a
33	benefit plan established or maintained by affiliated companies
34	comprising a consolidated corporation.
35	(3) The employee organization, in the case of a benefit plan
36	established or maintained by an employee organization.
37	(4) In a case of a benefit plan established or maintained:
38	(A) by two (2) or more employers;

1	(B) by two (2) or more employee organizations; or
2	(C) jointly by one (1) or more employers and one (1) or more
3	employee organizations;
4	and that is not of a type described in subdivision (2), the
5	association, committee, joint board of trustees, or other similar
6	group of representatives of the parties that establish or maintain
7	the benefit plan.
8	(w) "Premiums" means amounts, deposits, and considerations
9	received on covered policies, less returned premiums, returned
10	deposits, returned considerations, dividends, and experience credits.
11	The term does not include the following:
12	(1) Amounts, deposits, and considerations received for policies or
13	contracts or parts of policies or contracts for which coverage is
14	not provided under section 2.3(d) of this chapter, as qualified by
15	section 2.3(e) of this chapter, except that an assessable premium
16	must not be reduced on account of the limitations set forth in
17	section 2.3(e)(3), 2.3(e)(15), or 2.3(f)(2) of this chapter.
18	(2) Premiums in excess of five million dollars (\$5,000,000) on an
19	unallocated annuity contract not issued or not connected with a
20	governmental benefit plan established under Section 401, 403(b),
21	or 457 of the United States Internal Revenue Code.
22	(x) "Principal place of business" refers to the single state in which
23	individuals who establish policy for the direction, control, and
24	coordination of the operations of an entity as a whole primarily exercise
25	the direction, control, and coordination, as determined by the
26	association in the association's reasonable judgment by considering the
27	following factors:
28	(1) The state in which the primary executive and administrative
29	headquarters of the entity is located.
30	(2) The state in which the principal office of the chief executive
31	officer of the entity is located.
32	(3) The state in which the board of directors or similar governing
33	person of the entity conducts the majority of the board of
34	directors' or governing person's meetings.
35	(4) The state in which the executive or management committee of
36	the board of directors or similar governing person of the entity
37	conducts the majority of the committee's meetings.
38	(5) The state from which the management of the overall

operations of the entity is directed.

2.2.

However, in the case of a plan sponsor, if more than fifty percent (50%) of the participants in the plan sponsor's benefit plan are employed in a single state, that state is considered to be the principal place of business of the plan sponsor. The principal place of business of a plan sponsor of a benefit plan described in subsection (v)(4), if more than fifty percent (50%) of the participants in the plan sponsor's benefit plan are not employed in a single state, is considered to be the principal place of business of the association, committee, joint board of trustees, or other similar group of representatives of the parties that establish or maintain the benefit plan and, in the absence of a specific or clear designation of a principal place of business, is considered to be the principal place of business of the employer or employee organization that has the largest investment in the benefit plan in question on the coverage date.

- (y) "Receivership court" refers to the court in an insolvent insurer's or impaired insurer's state that has jurisdiction over the conservation, rehabilitation, or liquidation of the insolvent insurer or impaired insurer.
- (z) "Resident" means a person that resides or has the person's principal place of business in Indiana on the applicable coverage date.
- (aa) "State" includes a state, the District of Columbia, Puerto Rico, and a United States possession, territory, or protectorate.
- (bb) "Structured settlement annuity" means an annuity purchased to fund periodic payments for a plaintiff or other claimant in payment for or with respect to personal injury suffered by the plaintiff or other claimant.
- (cc) "Supplemental contract" means a written agreement entered into for the distribution of proceeds under a life, health, or annuity policy or contract.
- (dd) "Unallocated annuity contract" means an annuity contract or group annuity certificate:
 - (1) the owner of which is not a natural person; and
 - (2) that does not identify at least one (1) specific natural person as an annuitant;

except to the extent of any annuity benefits guaranteed to a natural person by an insurer under the contract or certificate. For purposes of this chapter, an unallocated annuity contract shall not be considered a

1	group policy or group contract.
2	SECTION 388. IC 27-8-11-10, AS ADDED BY P.L.111-2008.
3	SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
4	UPON PASSAGE]: Sec. 10. (a) As used in this section, "dialysis
5	facility" means an outpatient facility in Indiana at which a dialysis
6	treatment provider provides dialysis treatment.
7	(b) As used in this section, "contracted dialysis facility" means a
8	dialysis facility that has entered into an agreement with a particular
9	insurer under section 3 of this chapter.
10	(c) Notwithstanding section 1 of this chapter, as used in this section,
11	"insured" refers only to an insured who requires dialysis treatment.
12	(d) As used in this section, "insurer" includes the following:
13	(1) An administrator licensed under IC 27-1-25.
14	(2) An agent of an insurer.
15	(e) As used in this section, "non-contracted dialysis facility" means
16	a dialysis facility that has not entered into an agreement with a
17	particular insurer under section 3 of this chapter.
18	(f) An insurer shall not require an insured, as a condition of
19	coverage or reimbursement, to:
20	(1) if the nearest dialysis facility is located within thirty (30) miles
21	of the insured's home, travel more than thirty (30) miles from the
22	insured's home to obtain dialysis treatment; or
23	(2) if the nearest dialysis facility is located more than thirty (30)
24	miles from the insured's home, travel a greater distance than the
25	distance to the nearest dialysis facility to obtain dialysis
26	treatment;
27	regardless of whether the insured chooses to receive dialysis treatment
28	at a contracted dialysis facility or a non-contracted dialysis facility.
29	(g) An insurer shall, upon request of the insured, make all claim
30	payments for dialysis treatment payable only to the dialysis facility
31	and not to the insured, regardless of whether the dialysis facility is
32	a contracted dialysis facility or a non-contracted dialysis facility.
33	(h) A policy that is issued by an insurer that provides coverage
34	for dialysis treatment may not apply:
35	(1) benefit restrictions;
36	(2) deductible, copayment, coinsurance, or other out-of-pocket
37	expense requirements; or
38	(3) maximum lifetime coverage limitations;

to the coverage for dialysis treatment that are less favorable to an insured than the benefit restrictions, deductible, copayment, coinsurance, or other out-of-pocket expense requirements, or maximum lifetime coverage limitations that apply to all other medical and surgical benefits under the policy.

- (i) A dialysis facility or provider shall not bill an insured for any amount that exceeds:
 - (1) the amount paid by the insurer; plus

(2) any applicable deductible, copayment, coinsurance, or other expense paid by the insured;

in connection with dialysis treatment. An insurer that receives from an insured written proof that a dialysis facility or provider has violated this subsection shall not reimburse the dialysis facility or provider for any health care services rendered to any insured until the insurer receives written proof that the dialysis facility or provider has canceled the bill and reimbursed the insured in full any amount paid in relation to the amount billed in violation of this subsection.

(j) The department may adopt rules under IC 4-22-2 to implement this section.

SECTION 389. IC 27-8-15-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 1. This chapter applies to any individual or group health insurance plan that is issued for delivery in Indiana to at least three (3) two (2) employees of a small employer located in Indiana if one (1) of the following conditions is met:

- (1) Any part of the premium or benefits is paid by a small employer or any covered individual is reimbursed, whether through wage adjustments or otherwise, by a small employer for any part of the premium not including the administrative expenses of administering a payroll deduction plan where the employee contributes one hundred percent (100%) of the premium without reimbursement.
- (2) The health benefit plan is treated by the employer or any of the covered individuals as part of a plan or program for purposes of Section 106 or 162 of the United States Internal Revenue Code.

37 SECTION 390. IC 27-8-15-8.5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 8.5. (a) As used in this

1	chapter, "eligible employee" means an employee:
2	(1) who is employed to work at least thirty (30) hours each week;
3	The term includes:
4	(A) a sole proprietor; and
5	(B) a partner in a partnership;
6	if the sole proprietor or partner is included as an employee under
7	a health insurance plan of a small employer; and
8	(2) who meets an applicable waiting period required by a small
9	employer before gaining coverage under a health insurance
10	policy.
11	(b) The term includes:
12	(1) a sole proprietor;
13	(2) a partner in a partnership; and
14	(3) an owner of an S corporation;
15	regardless of whether the sole proprietor, partner, or owner is
16	included as an employee for purposes of taxation of a small
17	employer.
18	(b) (c) The term does not include:
19	(1) an employee who works on a temporary or substitute basis; or
20	(2) a seasonal employee.
21	SECTION 391. IC 27-8-15-9 IS AMENDED TO READ AS
22	FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 9. (a) Except as
23	provided in section 28 of this chapter, as used in this chapter, "health
24	insurance plan" or "plan" means any:
25	(1) hospital or medical expense incurred policy or certificate;
26	(2) hospital or medical service plan contract; or
27	(3) health maintenance organization subscriber contract;
28	provided to the employees of a small employer.
29	(b) The term does not include the following:
30	(1) Accident-only, credit, dental, vision, Medicare supplement,
31	long term care, or disability income insurance.
32	(2) Coverage issued as a supplement to liability insurance.
33	(3) Worker's compensation or similar insurance.
34	(4) Automobile medical payment insurance.
35	(5) A specified disease policy. issued as an individual policy.
36	(6) A limited benefit health insurance policy issued as an
37	individual policy.
38	(7) (6) A short term insurance plan that:

1	(A) may not be renewed; and
2	(B) has a duration of not more than six (6) months.
3	(8) (7) A policy that provides a stipulated daily, weekly, or
4	monthly payment to an insured during hospital confinement,
5	without regard to the actual expense of the confinement.
6	indemnity benefits not based on any expense incurred
7	requirement, including a plan that provides coverage for:
8	(A) hospital confinement, critical illness, or intensive care;
9	or
10	(B) gaps for deductibles or copayments.
11	(8) A supplemental plan that always pays in addition to other
12	coverage.
13	(9) A student health plan.
14	(10) An employer sponsored health benefit plan that is:
15	(A) provided to individuals who are eligible for Medicare;
16	and
17	(B) not marketed as, or held out to be, a Medicare
18	supplement policy.
19	SECTION 392. IC 27-8-15-31 IS AMENDED TO READ AS
20	FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 31. (a) If an eligible
21	employee who has been continuously covered under a health insurance
22	plan for at least ninety (90) days:
23	(1) loses coverage under the plan as the result of:
24	(A) termination of employment;
25	(B) reduction of hours;
26	(C) marriage dissolution; or
27	(D) attainment of any age specified in the plan; and
28	(2) is not eligible for continuation coverage under the federal
29	Consolidated Omnibus Budget Reconciliation Act of 1985;
30	and
31	(2) (3) requests a conversion policy from the small employer
32	insurer that insured the health insurance plan;
33	the individual is entitled to receive a conversion policy from the small
34	employer insurer.
35	(b) A request under subsection (a)(2) (a) must be made within thirty
36	(30) days after the individual loses coverage under the health insurance
37	plan.
38	(c) The premium for a conversion policy issued under this section

shall not exceed one hundred fifty percent (150%) of the rate that would have been charged under the small employer health insurance plan with respect to the individual if the individual had been covered as an eligible employee under the plan during the same period. If the health insurance plan under which the individual was covered is canceled or is not renewed, the rates shall be based on the rate that would have been charged with respect to the individual if the plan had continued in force, as determined by the small employer insurer in accordance with standard actuarial principles.

- (d) A conversion policy issued under this section must be approved by the insurance commissioner as described in IC 27-8-5-1. The commissioner may not approve a conversion policy unless the policy and its benefits are:
 - (1) comparable to those required under IC 27-13-1-4(a)(2) through IC 27-13-1-4(a)(5);
 - (2) reasonable in relation to the premium charged; and
- (3) in compliance with IC 27-8-6-1.

If the benefit limits of the conversion policy are not more than the benefit limits of the small employer's health insurance plan, the small employer insurer shall credit the individual with any waiting period, deductible, or coinsurance credited to the individual under the small employer's health insurance plan.

(e) This section expires on the effective date of a mechanism enacted by the general assembly to offset the potential fiscal impact on small employers and small employer insurers that results from the establishment of a continuation policy under section 31.1 of this chapter.

SECTION 393. IC 27-13-1-11.5, AS ADDED BY P.L.111-2008, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE UPON PASSAGE]: Sec. 11.5. "Dialysis facility" means an outpatient facility in Indiana at which a dialysis treatment provider provides dialysis treatment.

SECTION 394. IC 27-13-2-10 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: **Sec. 10. (a) A domestic health maintenance organization shall do the following:**

- (1) Maintain a physical office in Indiana.
- (2) If the health maintenance organization changes the

1	location of the office maintained under subdivision (1),
2	provide written notice to the department of insurance and all
3	subscribers at least thirty (30) days before the location is
4	changed, including the address and telephone number of the
5	new location.
6	(b) A domestic health maintenance organization operating
7	under this article is subject to the following:
8	(1) IC 27-1-7-11.
9	(2) IC 27-1-6-21.
10	SECTION 395. IC 27-13-34-12 IS AMENDED TO READ AS
11	FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 12. A limited service
12	health maintenance organization operated under this chapter is subject
13	to the following:
14	(1) IC 27-1-36 concerning risk based capital, unless exempted by
15	the commissioner under IC 27-1-36-1.
16	(2) IC 27-13-2-10.
17	(2) (3) IC 27-13-8, except for IC 27-13-8-2(a)(6) concerning
18	reports.
19	(3) (4) IC 27-13-9-3 concerning termination of providers.
20	(4) (5) IC 27-13-10-1 through IC 27-13-10-3 concerning
21	grievance procedures.
22	(5) (6) IC 27-13-11 concerning investments.
23	(6) (7) IC 27-13-15-1(a)(2) through IC 27-13-15-1(a)(3)
24	concerning gag clauses in contracts.
25	(7) (8) IC 27-13-21 concerning producers.
26	(8) (9) IC 27-13-29 concerning statutory construction and
27	relationship to other laws.
28	(9) (10) IC 27-13-30 concerning public records.
29	(10) (11) IC 27-13-31 concerning confidentiality of medical
30	information and limitation of liability.
31	(11) (12) IC 27-13-36-5 and IC 27-13-36-6 concerning referrals
32	to out of network providers and continuation of care.
33	(12) (13) IC 27-13-40 concerning comparison sheets of services
34	provided by the limited service health maintenance organization.
35	SECTION 396. IC 27-13-15-5, AS ADDED BY P.L.111-2008,
36	SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
37	UPON PASSAGE]: Sec. 5. (a) Notwithstanding IC 27-13-1-12, as used
38	in this section, "enrollee" refers only to an enrollee who requires

1	dialysis treatment.
2	(b) As used in this section, "health maintenance organization"
3	includes the following:
4	(1) A limited service health maintenance organization.
5	(2) An agent of a health maintenance organization or a limited
6	service health maintenance organization.
7	(c) A health maintenance organization shall not require an enrollee,
8	as a condition of coverage or reimbursement, to:
9	(1) if the nearest dialysis facility is located within thirty (30) miles
10	of the enrollee's home, travel more than thirty (30) miles from the
11	enrollee's home to obtain dialysis treatment; or
12	(2) if the nearest dialysis facility is located more than thirty (30)
13	miles from the enrollee's home, travel a greater distance than the
14	distance to the nearest dialysis facility to obtain dialysis
15	treatment;
16	regardless of whether the enrollee chooses to receive dialysis treatment
17	at a dialysis facility that is a participating provider or a dialysis facility
18	that is not a participating provider.
19	(d) A health maintenance organization shall, upon request of the
20	enrollee, make all claim payments for dialysis treatment payable
21	only to the dialysis facility and not to the enrollee, regardless of
22	whether the dialysis facility is or is not a participating provider.
23	(e) An individual contract or a group contract that provides
24	coverage for dialysis treatment may not apply:
25	(1) benefit restrictions;
26	(2) deductible, copayment, coinsurance, or other out-of-pocket
27	expense requirements; or
28	(3) maximum lifetime coverage limitations;
29	to the coverage for dialysis treatment that are less favorable to an
30	enrollee than the benefit restrictions, deductible, copayment,
31	coinsurance, or other out-of-pocket expense requirements, or
32	maximum lifetime coverage limitations that apply to all other
33	medical and surgical benefits under the individual contract or
34	group contract.
35	(f) A dialysis treatment facility or provider shall not bill an
36	enrollee for any amount that exceeds:
37	(1) the amount paid by the health maintenance organization;
38	plus

1	(2) any applicable deductible, copayment, coinsurance, or
2	other expense paid by the enrollee;
3	in connection with dialysis treatment. A health maintenance
4	organization that receives from an enrollee written proof that a
5	dialysis facility or provider has violated this subsection shall not
6	reimburse the dialysis facility or provider for any health care
7	services rendered to any enrollee until the health maintenance
8	organization receives written proof that the dialysis facility or
9	provider has canceled the bill and reimbursed the enrollee in full
10	any amount paid in relation to the amount billed in violation of this
11	subsection.
12	(g) The department may adopt rules under IC 4-22-2 to
13	implement this section.".
14	Page 330, between lines 12 and 13, begin a new paragraph and
15	insert:
16	"SECTION 370. IC 31-34-20-1, AS AMENDED BY P.L.146-2008,
17	SECTION 602, IS AMENDED TO READ AS FOLLOWS
18	[EFFECTIVE JULY 1, 2009]: Sec. 1. (a) Subject to this section and
19	section 1.5 of this chapter, if a child is a child in need of services, the
20	juvenile court may enter one (1) or more of the following dispositional
21	decrees:
22	(1) Order supervision of the child by the department.
23	(2) Order the child to receive outpatient treatment:
24	(A) at a social service agency or a psychological, a psychiatric,
25	a medical, or an educational facility; or
26	(B) from an individual practitioner.
27	(3) Remove the child from the child's home and authorize the
28	department to place the child in another home or shelter care
29	facility. Placement under this subdivision includes authorization
30	to control and discipline the child.
31	(4) Award wardship of the child to the department for
32	supervision, care, and placement.
33	(5) Partially or completely emancipate the child under section 6
34	of this chapter.
35	(6) Order the child's parent, guardian, or custodian to complete
36	services recommended by the department and approved by the
37	court under IC 31-34-16, IC 31-34-18, and IC 31-34-19.
38	(7) Order a person who is a party to refrain from direct or indirect

1	contact with the child.
2	(8) Order a perpetrator of child abuse or neglect to refrain from
3	returning to the child's residence.
4	(9) Order the department to place the child in the Indiana
5	Soldiers' and Sailors' Children's Home established by
6	IC 20-22.5-2-5 after considering:
7	(A) the admission requirements for the Indiana Soldiers'
8	and Sailors' Children's Home under IC 20-22.5-2;
9	(B) the best interests of the child; and
10	(C) the desirability of keeping the child with the child's
11	siblings.
12	The juvenile court may order the department to pay costs and
13	expenses of placing the child in the Indiana Soldiers' and
14	Sailors' Children's Home.
15	(b) A juvenile court may not place a child in a home or facility that
16	is located outside Indiana unless:
17	(1) the placement is recommended or approved by the director of
18	the department or the director's designee; or
19	(2) the juvenile court makes written findings based on clear and
20	convincing evidence that:
21	(A) the out-of-state placement is appropriate because there is
22	not a comparable facility with adequate services located in
23	Indiana; or
24	(B) the location of the home or facility is within a distance not
25	greater than fifty (50) miles from the county of residence of
26	the child.
27	(c) If a dispositional decree under this section:
28	(1) orders or approves removal of a child from the child's home or
29	awards wardship of the child to the department; and
30	(2) is the first juvenile court order in the child in need of services
31	proceeding that authorizes or approves removal of the child from
32	the child's parent, guardian, or custodian;
33	the juvenile court shall include in the decree the appropriate findings
34	and conclusions described in IC 31-34-5-3(b) and IC 31-34-5-3(c).".
35	Page 330, between lines 39 and 40, begin a new paragraph and
36	insert:
37	"SECTION 374. IC 31-40-1-2, AS AMENDED BY P.L.146-2008,
38	SECTION 665, IS AMENDED TO READ AS FOLLOWS

[EFFECTIVE JULY 1, 2009]: Sec. 2. (a) Except as otherwise provided 1 2 in this section and subject to: 3 (1) this chapter; and 4 (2) any other provisions of IC 31-34, IC 31-37, or other applicable 5 law relating to the particular program, activity, or service for which payment is made by or through the department; 7 the department shall pay the cost of any child services provided by or 8 through the department for any child or the child's parent, guardian, or 9 custodian. 10 (b) The department shall pay the cost of returning a child under IC 31-37-23. 11 12 (c) Except as provided under section 2.5 of this chapter, the 13 department is not responsible for payment of any costs of secure 14 detention. 15 (d) The department is not responsible for payment of any costs or 16 expenses for child services for a child if: 17 (1) the juvenile court has not entered the required findings and 18 conclusions in accordance with IC 31-34-5-3, IC 31-34-20-1, 19 IC 31-37-6-6, IC 31-37-19-1, or IC 31-37-19-6 (whichever is 20 applicable); and 21 (2) the department has determined that the child otherwise meets 2.2. the eligibility requirements for assistance under Title IV-E of the 23 federal Social Security Act (42 U.S.C. 670 et seg.). 24 (e) In all cases under this title, except as provided under 25 IC 31-34-20-1(a)(9), if the juvenile court orders services, programs, or 26 placements that: 27 (1) are not eligible for federal assistance under either Title IV-B 28 of the federal Social Security Act (42 U.S.C. 620 et seg.) or Title 29 IV-E of the federal Social Security Act (42 U.S.C. 670 et seq.); 30 and 31 (2) have not been recommended or approved by the department; 32 the department is not responsible for payment of the costs of those 33 services, programs, or placements. 34 (f) The department is not responsible for payment of any costs or 35 expenses for housing or services provided to or for the benefit of a 36 child placed by a juvenile court in a home or facility located outside 37 Indiana, if the placement does not comply with the conditions stated in 38 IC 31-34-20-1(b) or IC 31-37-19-3(b).

1	(g) The department is not responsible for payment of any costs or
2	expenses of child services for a delinquent child under a dispositional
3	decree entered under IC 31-37-19, if the probation officer who
4	prepared the predispositional report did not submit to the department
5	the information relating to determination of eligibility of the child for
6	assistance under Title IV-E of the Social Security Act (42 U.S.C. 670
7	et seq.), as required by IC 31-37-17-1(a)(3).
8	(h) If:
9	(1) the department is not responsible for payment of costs or
.0	expenses of services, programs, or placements ordered by a court
1	for a child or the child's parent, guardian, or custodian, as
2	provided in this section; and
3	(2) another source of payment for those costs or expenses is not
.4	specified in this section or other applicable law;
5	the county in which the child in need of services case or delinquency
6	case was filed is responsible for payment of those costs and expenses.".
7	Page 336, line 48, after "part in" insert "a county in which".
.8	Page 336, line 48, delete "(1)." and insert "(1) is located.".
9	Page 362, delete lines 36 through 48.
20	Page 363, delete lines 1 through 15.
21	Page 364, between lines 13 and 14, begin a new paragraph and
22	insert:
23	"SECTION 391. IC 36-7-26-1 IS AMENDED TO READ AS
24	FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 1. This chapter applies
2.5	to the following:
26	(1) A city having a population of more than seventy-five thousand
27	(75,000) but less than ninety thousand (90,000).
28	(2) A city having a population of more than one hundred five
29	thousand (105,000) but less than one hundred twenty thousand
0	(120,000).
31	(3) A city having a population of more than one hundred fifty
32	thousand (150,000) but less than five hundred thousand
33	(500,000).
34	(4) A city having a population of more than one hundred twenty
35	thousand (120,000) but less than one hundred fifty thousand
66	(150,000).
37	(5) Warrick County.
8	SECTION 392. IC 36-7-26-2 IS AMENDED TO READ AS

1	FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 2. (a) Present economic
2	conditions in certain areas of certain cities are stagnant or deteriorating.
3	(b) Present economic conditions in such areas are beyond remedy
4	and control by existing regulatory processes because of the substantial
5	public financial commitments necessary to encourage significant
6	increases in economic activities in such areas.
7	(c) Economic development of certain reclaimed coal land near
8	the Blue Grass Fish and Wildlife Area and Interstate Highway 164
9	is vital for a county described in section 1(5) of this chapter.
10	(c) (d) Encouraging economic development in these areas will:
11	(1) attract new businesses and encourage existing business to
12	remain or expand;
13	(2) increase temporary and permanent employment opportunities
14	and private sector investment;
15	(3) protect and increase state and local tax bases; and
16	(4) encourage overall economic growth in Indiana.
17	(d) (e) Redevelopment and stimulation of economic development
18	benefit the health and welfare of the people of Indiana, are public uses
19	and purposes for which the public money may be spent, and are of
20	public utility and benefit.
21	(e) (f) Economic development in such areas can be accomplished
22	only by a coordinated effort of local and state governments.
23	(f) (g) This chapter shall be liberally construed to carry out the
24	purposes of this chapter and to provide the county and cities with
25	maximum flexibility to accomplish those purposes.
26	SECTION 393. IC 36-7-26-14, AS AMENDED BY P.L.185-2005,
27	SECTION 51, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
28	JULY 1, 2009]: Sec. 14. (a) Whenever a commission determines that
29	the redevelopment and economic development of an area situated
30	within the commission's jurisdiction may require the establishment of
31	a district, the commission shall cause to be assembled data sufficient
32	to make the determinations required under section 15 of this chapter,
33	including the following:
34	(1) Maps and plats showing the boundaries of the proposed
35	district.
36	(2) A complete list of street names and the range of street
37	numbers of each street situated in the proposed district.

(3) A plan for the redevelopment and economic development of

38

the proposed district. The plan must describe the local public improvements necessary or appropriate for the redevelopment or economic development.

1 2

- (b) For a city described in section 1(2) or 1(3) of this chapter, the proposed district must contain a commercial retail facility with at least five hundred thousand (500,000) square feet, and any distributions from the fund must be used in the area described in subsection (a) or in areas that directly benefit the area described in subsection (a).
- (c) For a city described in section 1(4) of this chapter, the proposed district may not contain any territory outside the boundaries of a redevelopment project area established within the central business district of the city before 1985.
- (d) For a county described in section 1(5) of this chapter, the proposed district must be located completely or in part on reclaimed coal land near the Blue Grass Fish and Wildlife Area and Interstate Highway 164. However, the proposed district must be at least one hundred (100) yards away from the boundaries of the Blue Grass Fish and Wildlife Area.

SECTION 394. IC 36-7-26-16 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 16. (a) **This subsection does not apply to a county described in section 1(5) of this chapter.** Upon adoption of a resolution designating a district under section 15 of this chapter, the commission shall submit the resolution to the board for approval. In submitting the resolution to the board, the commission shall deliver to the board:

- (1) the data required under section 14 of this chapter;
- (2) the information concerning the proposed redevelopment and economic development of the proposed district; and
- (3) the proposed utilization of the revenues to be received under section 23 of this chapter.

This information may be modified from time to time after the initial submission. The commission shall provide to the board any additional information that the board may request from time to time.

(b) This subsection applies only to a county described in section 1(5) of this chapter. Upon adoption of a resolution designating a district under section 15 of this chapter, the commission shall submit the resolution to the fiscal body and the county commissioners of the county for ratification and then shall submit

the resolution to the board for approval. In submitting the resolution to the board, the commission shall deliver to the board:

- (1) the data required under section 14 of this chapter;
- (2) the information concerning the proposed redevelopment and economic development of the proposed district; and
- (3) the proposed use of the revenues to be received under section 23 of this chapter.

This information may be modified periodically after the initial submission. The commission shall provide to the board any additional information that the board requests.

(b) (c) Upon adoption of a resolution designating a district under section 15 of this chapter, and upon approval of the resolution by the board under subsection (a), the commission shall publish (in accordance with IC 5-3-1) notice of the adoption and purport purpose of the resolution and of the hearing to be held. The notice must provide a general description of the boundaries of the district and state that information concerning the district can be inspected at the commission's office. The notice must also contain a date when the commission will hold a hearing to receive and hear remonstrances and other testimony from persons interested in or affected by the establishment of the district. All affected persons, including all persons or entities owning property or doing business in the district, shall be considered notified of the pendency of the hearing and of subsequent acts, hearings, adjournments, and resolutions of the commission by the notice given under this section.

SECTION 395. IC 36-7-26-20 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 20. (a) This subsection does not apply to a county described in section 1(5) of this chapter. The determination of the commission to create a district under this chapter, after approval by the board, must be approved by ordinance of the legislative body of the city.

(b) This subsection applies only to a county described in section 1(5) of this chapter. The determination of the commission to create a district under this chapter, after approval by the board, must be approved by ordinance of the fiscal body of the county.

SECTION 396. IC 36-7-26-24 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2009]: Sec. 24. (a) The commission may issue bonds, payable in whole or in part, from money distributed

from the fund to the commission, to finance a local public improvement under IC 36-7-14-25.1 or may make lease rental payments for a local public improvement under IC 36-7-14-25.2 and IC 36-7-14-25.3. The term of any bonds issued under this section may not exceed twenty (20) twenty-five (25) years, nor may the term of any lease agreement entered into under this section exceed twenty (20) twenty-five (25) years. The commission shall transmit to the board, a transcript of the proceedings with respect to the issuance of the bonds or the execution and delivery of a lease agreement as contemplated by this section. The transcript must include a debt service or lease rental schedule setting forth all payments required in connection with the bonds or the lease rentals.

- (b) On January 15 of each year, the commission shall remit to the treasurer of state the money disbursed from the fund that is credited to the net increment account that exceeds the amount needed to pay debt service or lease rentals and to establish and maintain a debt service reserve under this chapter in the prior year and before May 31 of that year. Amounts remitted under this subsection shall be deposited by the auditor of state as other gross retail and use taxes are deposited.
- (c) The commission in a city described in section 1(2) of this chapter may distribute money from the fund only for the following:
 - (1) Road, interchange, and right-of-way improvements.
 - (2) Acquisition costs of a commercial retail facility and for real property acquisition costs in furtherance of the road, interchange, and right-of-way improvements.
 - (3) Demolition of commercial property and any related expenses incurred before or after the demolition of the commercial property.
 - (4) For physical improvements or alterations of property that enhance the commercial viability of the district.
- (d) The commission in a city described in section 1(3) of this chapter may distribute money from the fund only for the following purposes:
 - (1) For road, interchange, and right-of-way improvements and for real property acquisition costs in furtherance of the road, interchange, and right-of-way improvements.
 - (2) For the demolition of commercial property and any related expenses incurred before or after the demolition of the

1	commercial property.
2	(e) The commission in a city described in section 1(4) of this
3	chapter may distribute money from the fund only for the following
4	purposes:
5	(1) For:
6	(A) the acquisition, demolition, and renovation of property;
7	and
8	(B) site preparation and financing;
9	related to the development of housing in the district.
10	(2) For physical improvements or alterations of property that
11	enhance the commercial viability of the district.
12	(f) The commission in a county described in section 1(5) of this
13	chapter may distribute money from the fund for the following
14	district project costs associated with the development or
15	redevelopment of the district:
16	(1) The total cost of acquisition of all land, rights-of-way, and
17	other property to be acquired, developed, or redeveloped for
18	the project.
19	(2) Site preparation, including utilities and infrastructure.
20	(3) Costs associated with the construction or establishment of
21	a museum and education complex and a multisport athletic
22	complex that are owned or leased by entities that are exempt
23	from income taxation under Section 501(c)(3) of the Internal
24	Revenue Code.
25	(4) Road, interchange, and right-of-way improvements.
26	(5) Public parking facilities.
27	(6) All reasonable and necessary architectural, engineering,
28	legal, financing, accounting, advertising, bond discount, and
29	supervisory expenses related to the acquisition and
30	development or redevelopment of the property or the issuance
31	of bonds.
32	(7) Debt service, lease payments, capitalized interest, or debt
33	service reserve for the bonds to the extent the commission
34	determines that a reserve is reasonably required.
35	SECTION 397. IC 36-7-26-25, AS AMENDED BY P.L.146-2008,
36	SECTION 769, IS AMENDED TO READ AS FOLLOWS
37	[EFFECTIVE JULY 1, 2009]: Sec. 25. (a) This section does not apply
2 &	to a county described in section 1(5) of this chanter

1 **(b)** The board may not approve a resolution under section 16 of this 2 chapter until the board has satisfied itself that the city in which the 3 proposed district will be established has maximized the use of tax 4 increment financing under IC 36-7-14 or IC 36-7-14.5 to finance public 5 improvements within or serving the proposed district. The city may not grant property tax abatements to the taxpayers within the proposed 6 7 district or a district, except that the board may approve a resolution 8 under section 16 of this chapter in the proposed district or a district in 9 which real property tax abatement not to exceed three (3) years has 10 been granted.". 11 Page 375, between lines 2 and 3, begin a new paragraph and insert: 12 "SECTION 409. IC 6-1.1-8-23 IS REPEALED [EFFECTIVE MARCH 1, 2009 (RETROACTIVE)].". 13 14 Page 375, between lines 6 and 7, begin a new paragraph and insert 15 the following: "SECTION 424. THE FOLLOWING ARE REPEALED 16 17 [EFFECTIVE JULY 1, 2009]: IC 16-18-2-4; IC 16-18-2-24; 18 IC 16-18-2-88; IC 16-18-2-172; IC 16-18-2-225; IC 16-19-6; 19 IC 16-33-4.". 20 Page 375, between lines 10 and 11, begin a new paragraph and 21 insert: 2.2. "SECTION 463. THE FOLLOWING ARE REPEALED [EFFECTIVE JULY 1, 2009]: IC 27-1-3.5-3; IC 27-1-3.5-3.5; 23 IC 27-1-3.5-9; IC 27-1-3.5-12; IC 27-1-25-7.5; IC 27-8-15-2; 24 25 IC 27-8-15.5. 26 SECTION 464. [EFFECTIVE JULY 1, 2009] (a) IC 27-8-15, as 27 amended by this act, applies to a health insurance plan (as defined 28 in IC 27-8-15-9) that is issued, entered into, delivered, amended, or 29 renewed after June 30, 2009. 30 (b) This SECTION expires July 1, 2014. 31 SECTION 465. [EFFECTIVE UPON PASSAGE] (a) 32 IC 27-8-11-10, as amended by this act, applies to an agreement 33 between an insurer and a dialysis facility that is entered into, 34 amended, or renewed on or after the effective date of the 35 SECTION of this act that amends IC 27-8-11-10. 36 (b) IC 27-13-15-5, as amended by this act, applies to a contract 37 between a health maintenance organization and a dialysis facility

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that is entered into, amended, or renewed after the effective date

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1	of the SECTION of this act that amends IC 27-13-15-5.".
2	Page 377, between lines 12 and 13, begin a new paragraph and
3	insert:
4	"(k) To implement this SECTION, the
5	(1) office shall adopt rules under IC 4-22-2. and
6	(2) office and department of state revenue shall adopt joint rules
7	under IC 4-22-2.
8	(l) Not later than July 1, 2003, August 1, 2009, the office shall do
9	the following:
0	(1) Request the United States Department of Health and Human
1	Services under 42 CFR 433.72 to approve waivers of 42 CFR
2	433.68(c) and 42 CFR 433.68(d) by demonstrating compliance
.3	with 42 CFR 433.68(e)(2)(ii).
4	(2) Submit any state Medicaid plan amendments to the United
5	States Department of Health and Human Services that are
6	necessary to implement this SECTION.
7	(m) After approval of the waivers and state Medicaid plan
8	amendment applied for under subsection (1), this SECTION, the office
9	and the department of state revenue shall implement this SECTION
20	effective July 1, 2003. August 1, 2009.
21	(n) The select joint commission on Medicaid oversight, established
22	by IC 2-5-26-3, shall review the implementation of this SECTION. The
23	office may not make any change to the reimbursement for nursing
24	facilities unless the select joint commission on Medicaid oversight
25	recommends the reimbursement change.
26	(o) A nursing facility or a health facility may not charge the facility's
27	residents for the amount of the quality assessment that the facility pays
28	under this SECTION.
29	(p) The office may withdraw a state plan amendment submitted
0	under subsection (e), (f), or (g) this SECTION only if the office
31	determines that failure to withdraw the state plan amendment will
32	result in the expenditure of state funds not funded by the quality
3	assessment.
4	(q) If a health facility fails to pay the quality assessment under this
55	SECTION not later than ten (10) days after the date the payment is due
66	the health facility shall pay interest on the quality assessment at the
37	same rate as determined under IC 12-15-21-3(6)(A).

(r) The following shall be provided to the state department of health:

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1	(1) The office shall report to the state department of health each
2	nursing facility and each health facility that fails to pay the
3	quality assessment under this SECTION not later than one
4	hundred twenty (120) days after payment of the quality
5	assessment is due.
6	(2) The department of state revenue shall report each health
7	facility that is not a nursing facility that fails to pay the quality
8	assessment under this SECTION not later than one hundred
9	twenty (120) days after payment of the quality assessment is due.
0	(s) The state department of health shall do the following:
1	(1) Notify each nursing facility and each health facility reported
2	under subsection (r) that the nursing facility's or health facility's
3	license under IC 16-28 will be revoked if the quality assessment
4	is not paid.
5	(2) Revoke the nursing facility's or health facility's license under
6	IC 16-28 if the nursing facility or the health facility fails to pay
7	the quality assessment.
.8	(t) An action taken under subsection (s)(2) is governed by:
9	(1) IC 4-21.5-3-8; or
20	(2) IC 4-21.5-4.
21	(u) The office shall report the following information to the select
22	joint commission on Medicaid oversight established by IC 2-5-26-3 at
23	every meeting of the commission:
24	(1) Before the quality assessment is approved by the United States
2.5	Centers for Medicare and Medicaid Services:
26	(A) an update on the progress in receiving approval for the
27	quality assessment; and
28	(B) a summary of any discussions with the United States
29	Centers for Medicare and Medicaid Services.
0	(2) After the quality assessment has been approved by the United
31	States Centers for Medicare and Medicaid Services:
32	(A) an update on the collection of the quality assessment;
33	(B) a summary of the quality assessment payments owed by a
34	nursing facility or a health facility; and
55	(C) any other relevant information related to the
66	implementation of the quality assessment.
37	(v) This SECTION expires August 1, 2009. 2011. ".
8	Page 382 line 20 delete "July 1 2009" and insert "October 1

1	2009,".	
2	Page 383, line 11, delete "July 1, 2009," and insert "October 1,	
3	2009,".	
4	Page 384, line 6, delete "July 1, 2009," and insert "October 1,	
5	2009,".	
6	Page 385, between lines 32 and 33, begin a new paragraph and	
7	insert:	
8	"SECTION 454. [EFFECTIVE UPON PASSAGE] (a) The	
9	definitions in IC 2-5-31, as added by this act, apply throughout this	
10	SECTION.	
11	(b) Before August 1, 2009, the voting members of the task force	
12	established by IC 2-5-31-3, as added by this act, shall be appointed.	
13	(c) The task force shall hold its first meeting in August 2009 and	
14	conduct business the task force considers necessary.	
15	SECTION 455. [EFFECTIVE UPON PASSAGE] (a) As used in	
16	this SECTION, "children's home" refers to the Indiana Soldiers'	
17	and Sailors' Children's Home established by IC 20-22.5-2-5 (IC	
18	16-33-4-5 before July 1, 2009).	
19	(b) As used in this SECTION, "department" refers to the	
20	department of education established by IC 20-19-3-1.	
21	(c) As used in this SECTION, "state superintendent" has the	
22	meaning set forth in IC 20-18-2-20.	
23	(d) After June 30, 2009, the following apply:	
24	(1) The powers and duties of the state department of health	
25	regarding the administration of the children's home are	
26	transferred to the department.	
27	(2) All the property of the children's home is transferred from	
28	the state department of health to the department.	
29	(3) An appropriation to the state department of health for the	
30	administration of the children's home after June 30, 2009, is	
31	transferred to the department.	
32	(4) Any funds administered by the state department of health	
33	on behalf of the children's home:	
34	(A) are transferred to the department; and	
35	(B) shall be administered by the department.	
36	(5) Positions for the children's home are transferred to the	
37	department.	
38	(6) This subdivision applies to an individual employed at the	

1	children's home on January 1, 2009:
2	(A) The individual is entitled to become an employee of the
3	children's home on the later of the following:
4	(i) July 6, 2009.
5	(ii) Seven (7) days after this act becomes law.
6	(B) The individual is entitled to have the individual's
7	service as an employee of the children's home before July
8	1, 2009, included for the purpose of computing all
9	applicable employment rights and benefits with the
10	department.
11	(7) All leases, liabilities, and obligations entered into by the
12	state department of health for the operation of the children's
13	home before July 1, 2009, that are legal and valid on July 1,
14	2009, are obligations of the department beginning July 1,
15	2009.
16	(e) Before July 16, 2009, the department with the cooperation of
17	the state department of health shall open the children's home and
18	offer all services provided by the children's home before the
19	children's home closure in May 2009 before the later of the
20	following:
21	(1) July 16, 2009.
22	(2) Fourteen (14) days after this act becomes law.
23	Any expenses incurred by the state department of health relating
24	to this subsection shall be reimbursed by the department from
25	funds available to administer or operate the children's home.
26	(f) Before the date the children's home opens under subsection
27	(e), the department shall offer placement to all children residing at
28	the children's home on January 1, 2009, and who meet the age
29	requirements under IC 20-22.5-2-11. Children admitted to the
30	children's home under this subsection shall be subject to any fees
31	and admission requirements in place on January 1, 2009, until the
32	fees or admission requirements are changed by an act of the
33	general assembly or the superintendent of the children's home with
34	the approval of the department.
35	(g) Notwithstanding any other statute or policy, before July 1,
36	2009, the state department of health shall not authorize the
37	removal, sale, or destruction of:

(1) instructional or residential equipment;

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1	(2) furnishings;
2	(3) records;
3	(4) tools;
4	(5) vehicles; or
5	(6) artifacts;
6	located at the children's home on January 1, 2009.
7	(h) Before the later of:
8	(1) July 6, 2009; or
9	(2) Seven (7) days after this act becomes law;
10	the state department of health and the commission on public
11	records established under IC 5-15-5.1-3 shall return any item
12	described in subsection (g) to the children's home that was
13	removed from the children's home after January 1,2009. The state
14	department of health shall ensure that the children's home receive
15	all the proceeds for property described in subsection (g) that was
16	sold by the state department of health after January 1, 2009.
17	(i) This SECTION expires July 1, 2011.
18	SECTION 456. [EFFECTIVE UPON PASSAGE] There is
19	appropriated to the Indiana Soldiers' and Sailors' Children's Home
20	two million dollars (\$2,000,000) from funds received under the
21	federal American Recovery and Reinvestment Act of 2009. The
22	appropriation shall be used for modernizing, renovating, and
23	repairing the Indiana Soldiers' and Sailors' Children's Home. The
24	appropriation is for the state fiscal year beginning July 1, 2009
25	and ending June 30, 2010. The appropriation is in addition to other
26	money that may be available for this purpose.
27	SECTION 441. [EFFECTIVE UPON PASSAGE] (a) As used in
28	this SECTION, "commission" refers to the criminal code
29	evaluation commission established by subsection (b).
30	(b) The criminal code evaluation commission is established to
31	evaluate the criminal laws of Indiana. If, based on the
32	commission's evaluation, the commission determines that change
33	are necessary or appropriate, the commission shall make
34	recommendations to the general assembly for the modification o
35	the criminal laws.

(d) The commission may meet during the months of:

legislative council or as directed by the commission chair.

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(c) The commission may study other topics assigned by the

1	(1) July, August, and September of 2009;
2	(2) April, May, June, July, August, and September of 2010;
3	and
4	(3) June, July, August, and September of 2011.
5	(e) The commission consists of sixteen (16) members appointed
6	as follows:
7	(1) Four (4) members of the senate, not more than two (2) of
8	whom may be affiliated with the same political party, to be
9	appointed by the president pro tempore of the senate.
10	(2) Four (4) members of the house of representatives, not
11	more than two (2) of whom may be affiliated with the same
12	political party, to be appointed by the speaker of the house of
13	representatives.
14	(3) The attorney general or the attorney general's designee.
15	(4) The commissioner of the department of correction or the
16	commissioner's designee.
17	(5) The executive director of the prosecuting attorneys council
18	of Indiana or the executive director's designee.
19	(6) The executive director of the public defender council of
20	Indiana or the executive director's designee.
21	(7) Two (2) judges who exercise criminal jurisdiction and are
22	appointed as follows:
23	(A) One (1) member appointed by the president pro
24	tempore of the senate.
25	(B) One (1) member appointed by the speaker of the house
26	of representatives.
27	(8) Two (2) professors who are employed by a law school in
28	Indiana, have expertise in criminal law, and are appointed as
29	follows:
30	(A) One (1) member appointed by the president pro
31	tempore of the senate.
32	(B) One (1) member appointed by the speaker of the house
33	of representatives.
34	(f) The chairman of the legislative council shall annually appoint
35	a legislative member of the commission to serve as chair of the
36	commission.
37	(g) If a legislative member of the commission ceases to be a
38	member of the chamber from which the member was appointed,

1	the member also ceases to be a member of the commission.	
2	(h) A legislative member of the commission may be removed a	
3	any time by the appointing authority who appointed the legislative	
4	member.	
5	(i) If a vacancy exists on the commission, the appointing	
6	authority who appointed the former member whose position is	
7	vacant shall appoint an individual to fill the vacancy.	
8	(j) The commission shall submit to the legislative council in an	
9	electronic format under IC 5-14-6:	
10	(1) annual reports containing the commission's findings and	
11	recommendations before November 1 of each year; and	
12	(2) a final report of the results of its study before November	
13	1, 2011.	
14	(k) The Indiana criminal justice institute shall provide staf	
15	support to the commission to prepare:	
16	(1) minutes of each meeting; and	
17	(2) the reports required by subsection (j).	
18	(l) The legislative services agency shall provide staff support to	
19	the commission to:	
20	(1) advise the commission on legal matters, crimina	
21	procedures, and legal research; and	
22	(2) draft potential legislation.	
23	(m) Each member of the commission is entitled to receive the	
24	same per diem, mileage, and travel allowances paid to individuals	
25	who serve as legislative and lay members, respectively, of interim	
26	study committees established by the legislative council.	
27	(n) The affirmative votes of a majority of all the members who	
28	serve on the commission are required for the commission to take	
29	action on any measure, including the final report.	
30	(o) Except as otherwise specifically provided by this SECTION	
31	the commission shall operate under the rules of the legislativ	
32	council. All funds necessary to carry out this SECTION shall b	
33	paid from appropriations to the legislative council and the	
34	legislative services agency.	
35	(p) This SECTION expires December 31, 2011.".	
36	Renumber all SECTIONS consecutively.	
	(Reference is to HR 1001(ss) as introduced)	

and when so amended that said bill do pass.	
	Representative Crawford